



Lapsing of Consent

Section 125 Resource Management Act 1991

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Guide for Applicants

Have you provided?

- Five copies of your application and attachments. (Note: If five complete copies are not supplied, actual time and cost for administration and photocopying will be charged and requires payment before the resource consent can be issued).
- Copy of approved plans.
- Explanatory Letter outlining degree of satisfaction with statutory tests under Section 125 of the Resource Management Act 1991.
- Photographs of current situation on site, entrance way(s) on road, or anything else that will assist your application.
- Application Form fully completed.
- Application fee of \$400.00 (minimum fee) including GST (fee valid to 30 June 2010).

All of the above information must be supplied with your application.

Please do not hesitate to contact the Duty Planner at our Barks Corner Office (07)571 8008 or 0800 926 732 if you require any assistance.

**In accordance with s36(3) of the Resource Management Act 1991, Council will be recovering and charging for those processing costs over and above the application lodgement fee already paid. Please note that this may or may not pertain to your particular application and will only apply where the fixed lodgement fee is exceeded.
The hourly rate for roles involved in the processing of this application can vary from \$100.00 to \$135.00 per hour.**



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Office Use Only

Criteria for Acceptance: Counter and Postal Applications

Application

Page 1	Q1-Q4	Application Details completed in full	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
	Q5	Application Details of proposed activity	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
	Q9 & 11	Address for Service – Owner or Agent	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
	Q10	Payment Details	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
	Q12-14	Assessment	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
	All Pages	Check all questions answered and application fee provided	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No

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Q6	Application minimum fee (\$400.00 inc GST)	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
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Note: If any criteria indicates "NO", the application may be incomplete (Setion 88 (3) RMA 1991)

Planner's Assessment

Is the application complete?

Yes No

DATE
STAMP
(if accepted as
complete)

If incomplete the reasons are:

Reference of Advice to Applicant

Date: ____/____/____

Letter Reference: _____

Payment Details: RC Lodgment Account

Date Paid: ____/____/____

Receipt Number: _____



9. Owner Details

First Name/s: _____

Surname: _____

Postal Address: _____

Phone: _____ Mobile: _____

Fax: _____ Email: _____

10. Payment Details *Note: Only where applicable (if not the applicant):*

Name and address of person liable for application processing fees/refunds (where applicable).

A minimum fee is payable on lodgement of all applications. In some cases, this will be the whole cost of the application. In other cases a further invoice will be issued at the time of the decision (s36 Resource Management Act).

i) Application processing fees

Name and address for accounts/refunds:

First Name/s: _____

Surname: _____

Postal Address: _____

Phone: _____ Mobile: _____

Fax: _____ Email: _____

Signature of person responsible for the payment of any invoices associated with the process of this application:

..... Date:.....

Note: Some applications may incur additional processing fees. In these circumstances the name and address of the person responsible for the **payment** of the further invoices **must** be included, and their signature provided in this section of the application form. Please note that by signing section 10(i) of this application form you are agreeing to be responsible for payment of invoices. In addition to meeting the costs of any other invoices you will be liable to pay all costs and expenses of debt recovery and/or legal costs incurred by the Council of and incidental to enforcement of any debt.

11. Address for Service of Agent *(if not the applicant)*

First Name/s: _____

Surname: _____

Postal Address: _____

Phone: _____ Mobile: _____

Fax: _____ Email: _____

(Note: It is mandatory to provide an accurate address for service and contact phone details)

Applicant's Signature

..... Date:

To be signed for or on behalf of the applicant



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It is **mandatory** to complete this section of the application form. Please complete on another page if you require more room.

12. Substantial Progress

Section 125(1)(b)(i) whether substantial progress or effort has been, and continues to be, made towards giving effect to the consent. Describe works/effort and timeline to date since consent approved.

13. Written Approvals

Section 125(1)(b)(ii) whether the applicant has obtained approval from persons who may be adversely affected by the granting of the extension.

14. Policies & Objectives

Section 125(1)(b)(iii) the effect of the extension on the policies and objectives of any plan or proposed plan.
