

Written Approval of an Affected Person

Resource Management Act 1991

Consent Application No. (if known): _____

Application and applicant's details to be completed by the applicant

Applicant(s) Name: Mapua Boat Ramp Trust

Address and legal description of property to which the application relates:

11 & 6-16 Tahi Street, Mapua Waterfront Park & Coastal Marine Area

Full description* of the proposed activity:

Construction of Boat Ramp and associated access and parking off Tahi Street. Construction of a sea scout building in the Coastal Environment Area. Associated consents for stormwater discharge, earthworks in the Coastal Environment Area and the Coastal Marine Area. Occupation of the foreshore for the boat ramp. Earthworks within HAIL site ie contaminated site.

***IMPORTANT NOTE TO APPLICANTS:** *It is very important that a full and accurate description of the activity is stated. If this description does not cover all aspects of the proposal, the Council may require you to amend this form and re-obtain all the approvals. Please also ensure that a copy of any plans accompanying the application is signed by all persons who sign this form. Please seek advice from a Council Consent Planner if you are unsure whether this part of the form has been filled in correctly.*

Affected persons details to be completed by the person giving approval

PLEASE READ THIS IMPORTANT NOTE BEFORE YOU COMPLETE AND SIGN THIS FORM

*You should only sign this form if you **support or have no opposition** to the granting of the resource consent for the application referred to above. If you do not understand any part of this process, please contact a Consent Planner at the Tasman District Council, as signing this form will prevent Council from having regard to any effects of the activity on you or your property.*

Please complete either question 1 or 2 (and question 3 if you are signing this form on behalf of another person)

1. **I have an interest in the property situated at:**

13 Tahi St, Mapua

(insert physical address or legal description)

My interest in the above property is as follows (please tick either box (A) or (B)):

A) **I am the Owner**

(Note: Owner includes all trustees of any trust owning a property and all members of any Body Corporate authorised to manage a property. It will include all members of any partnership or syndicate owning the property. It will also include any person(s) or entity that has entered into an agreement to purchase or lease the property.)

AND (please tick one of the following boxes):

I reside at the property stated above; OR **I do not reside at the property stated above**

Please list the full names and contact details of ALL other registered owners:

OR

B) I am an Occupier

Please list the full names of ALL other persons over 18 years of age who live at the property:

2. I do not own or occupy property near the application site but:

I am (or may be) adversely affected by the proposed activity

Name:

Organisation* (if any):

**For instance: Iwi authority; Department of Conservation; Fish & Game NZ; Historic Places Trust etc ...*

3. I have authority to sign this form on behalf of another person(s):

(i) please list the full name(s) of any person(s) you are signing on behalf of; and

(ii) provide signed written proof from each person you are signing on behalf of that you have authority to sign this form on their behalf.

(Note: If you are signing as a person's attorney, a copy of the Power of Attorney signed by that person must be provided.)

Written approval

DECLARATION

I have read and understood the information provided with this form. (Be sure that you have read the notes on page 3).

I have been given details of the full and final proposal, including a copy of the resource consent application form, the assessment of environmental effects and any plans accompanying the application.

I give my approval to the proposal as outlined in the resource consent application, the assessment of environmental effects and any plans.

I have signed a copy of any accompanying plans as shown to me by the Applicant for that purpose.

I understand the Council will not take into account any effects the proposed activity may have on me or my property when considering the application unless notice is given to the Council by me in writing prior to the consent being issued that my approval is withdrawn.

Signature: Annette K Walker

Date: 8 Dec 2023

Print Full Name: Annette K Walker

Daytime phone number: 027 540 2850

Signature:

Date:

Print Full Name:

Daytime phone number: