FORM 6: FURTHER SUBMISSION ON A PUBLICLY NOTIFIED PROPOSED PLAN CHANGE UNDER CLAUSE 8 SCHEDULE 1 TO THE RESOURCE MANAGEMENT ACT 1991 (RMA)

HAMILTON CITY OPERATIVE DISTRICT PLAN PROPOSED PLAN CHANGE 5 - PEACOCKE STRUCTURE PLAN

FURTHER SUBMISSION FORMS CAN BE:

- Posted to: Freepost 172189, Hamilton City Council, Private Bag 3010, Hamilton 3240, Attn: Plan Change 5 Further Submission.
- Delivered to: Hamilton City Council Municipal Building, Garden Place, Hamilton.
- Emailed to: haveyoursay@hcc.govt.nz

NOTE TO PERSON MAKING A FURTHER SUBMISSION:

Important: Further submissions must reach council by Wednesday 16 March 2022.

You must serve a copy of your further submission on the original submitter within five working days after it is served on the local authority.

Please note that your submission (or part of your submission) may be struck out if the authority is satisfied that at least one of the following applies to the submission (or part of the submission):

- It is frivolous or vexatious;
- It discloses no reasonable or relevant case;
- It would be an abuse of the hearing process to allow the submission (or part) to be taken further;
- It contains offensive language;
- It is supported only by material that purports to be independent expert evidence, but has been prepared by a person who is not independent or who does not have sufficient specialised knowledge or skill to give expert advice on the matter.

Following the close of further submissions, a report will be prepared on the proposal and a hearing date will be set and notified to all submitters and 'further submitters' who wish to be heard.

Council will make all further submissions, including name and contact details, publicly available on Council's website. Personal information will also be used for the administration of the submission process and will be made public.

Please print and do not use pencil. You can attach more pages if necessary. If you do not wish to use this form, please ensure that the same information required by this form is covered in your further submission.

SUBMITTER DETAILS (all fields required)

Full name:

Contact Person: (If different from above, include name and designation) **Company name:** (if applicable)

Postal address for service:

(or alternative method of service under s 352 of the RMA)

Email address for service:

Phone number(s):

FURTHER SUBMITTER RELEVANCE | am: (select one)

A person representing a relevant aspect of the public interest.

A person who has an interest in the proposal that is greater than the interest the general public has.

The local authority for the relevant area.

State the reason for your selection:

DO YOU WISH TO ATTEND AND SPEAK AT THE COUNCIL HEARING IN SUPPORT OF MY FURTHER SUBMISSION?

Yes No

IF OTHERS MAKE A SIMILAR SUBMISSION WOULD YOU BE PREPARED TO CONSIDER PRESENTING A JOINT CASE WITH THEM AT ANY HEARING?

Yes No

SIGNATURE OF FURTHER SUBMITTER (your signature or that of the person authorised to sign on behalf of the person making this further submission)

THE SPECIFIC SUBMISSION(S) THAT THIS FURTHER SUBMISSION RELATES TO ARE:

NAME AND ADDRESS OF ORIGINAL SUBMITTER AND SUBMITTER NUMBER	ORIGINAL SUBMISSION POINT NUMBER	STATE WHETHER YOU SUPPORT OR OPPOSE THIS SPECIFIC PART OF THE ORIGINAL SUBMISSION	STATE THE REASONS FOR YOUR SUPPORT OR OPPOSITION	WHAT DECISION DO YOU SEEK FROM COUNCIL ON THE WHOLE OR PART OF THE ORIGINAL SUBMISSION? Give precise details. Sample - I seek that the whole (or part [describe part]) of the submission be either: Allowed / Disallowed
		Support		
		Oppose		
		Support		
		Oppose		
		Support		
		Oppose		

Please ensure that you fill in all columns of the table for each submission(s) or submission point(s) you are further submitting on. Use additional sheets if required.