

Submission Form 16 to the Otago Regional Council on consent applications

This is a Submission on (a) limited notified/publicly notified resource consent application/s pursuant to the Resource Management Act 1991.

Full Name/s: CHALLONGER	STENEN GREEN
Postal Address:	
	Post Code:
Phone number: Business:	Private:
Mobile:	•
Email address:	
or:	nit a NEUTRAL submission on (circle one) the applicati
And/or Organisation:	City Council
	- 280
Location: Smooth	
Purpose: Land fil	7
he specific parts of the application/s that	my submission relates to are: (Give details)
Confuntation - Water	Assessant Beaut
	land All Management Man
	Vo ARiahan Regonaserdaban Re
	u support or oppose the application or specific parts of plication or specific parts of it and the reasons for yo
Not Konpy	
I like to come to Box	Aton Seach & world'se consensely
10 so it this require	covert all approved.



I/We seek the following decision general nature of any conditions		give precise de	tails, including the
No worseft	**		
I/we: ☐ Wish to be heard in suppor ☐ Not wish to be heard in sup			
The two wish to be heard in sup	sport of outhing submission		
If others make a similar submissio	on, I/we will consider presenting	a joint case with	them at a hearing.
□ No			
I, am/am not (choose one) a trad the Resource Management Act 19		or the purposes	of Section 308B of
*If trade competitor chosen, pleas	se complete the next statement,	otherwise leave	blank.
(, am/am not (choose one) direct application that:	tly affected by an effect as a re	sult of the prop	osed activity in the
a) adversely affects the envir	ronment; and empetition or the effects of trade	competition.	
I, do/do not (choose one) wish to application.	be involved in any pre-hearing	meeting that m	nay be held for this
I doldo not request* that the loca decide the application to 1 or m	ıl authority delegates its function ore hearings commissioners w	ns, powers, and tho are not me	duties to hear and mbers of the local
authority.			
I have/have not served a copy of	my submission on the applican	ıt.	
en e	·		
C. S. Gren		a M	hi
Signature/s of submitter/s (or person authorised to sign on	behalf of submitter/s)	(Date)	*************************************