

Submission Form 16 to the Otago Regional Council on consent applications

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		ited notified/public gement Act 1991.	cly notified resource c	onsent application/s
Submitter Details (please print clear				FILE No.
Full Name/s:	Neil	Stuart	Nobilion	
Postal Address:	7			
Phone number:	Business:		Private:	
	Mobile:		-	
Email address:				
I/ we wish to SUPI of:	PORT OPPOS	/ submit a NEUTF	RAL submission on (circl	e one) the application
Applicant's Name	. D	unedin	City Coun	ci l
And/or Organisat				
Application Numb	per: R	M. 20.2	80	
Location:		nooth		
Purpose:	L	andfil	0	
The specific parts	of the application	n/s that my submis	sion relates to are: (Give	e details)
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that every	are com	enjoj.	Surming,	Subj Direy
	neutral regarding	the application of	or oppose the application respectific parts of it and	



general nature of any conditions sought)
Not conset!
I/we: Wish to be heard in support of our/my submission Not wish to be heard in support of our/my submission
If others make a similar submission, I/we will consider presenting a joint case with them at a hearing. ☐ Yes ☐ No
I, am/am not (choose one) a trade competitor* of the applicant (for the purposes of Section 308B of the Resource Management Act 1991).
*If trade competitor chosen, please complete the next statement, otherwise leave blank.
I, am/am not (choose one) directly affected by an effect as a result of the proposed activity in the application that: a) adversely affects the environment; and b) does not relate to trade competition or the effects of trade competition.
I, do do not choose one) wish to be involved in any pre-hearing meeting that may be held for this application.
I do/do not request* that the local authority delegates its functions, powers, and duties to hear and decide the application to 1 or more hearings commissioners who are not members of the local authority.
I have/have not served a copy of my submission on the applicant.
Signature/s of submitter/s (or person authorised to sign on behalf of submitter/s) (Date)