



Written Approval Form

Office Use Only

Date Received:

Person Giving Approval

Full Name(s): _____

Company/
Organisation Name: _____

Title: _____

Postal Address: _____

Physical Address: _____

Phone No's: Bus _____ After Hours _____
Mobile _____ Fax No _____

Application Details (to be completed by Applicant)

ARC Consent No: _____ ARC File No: _____

Applicant(s) Name: _____

Location/Site Address: _____

Map Reference: _____ (e.g. NZMS 260)

Summary Description of Proposed Activity and Consent Sought:

Information Viewed: _____

Reference No.s of plans reviewed _____

Copy of AEE Viewed: Yes No

Don't forget to sign this form on page 2

Important

Before signing this form you should read the information below. If you are in any doubt about the implications of giving your written approval you should seek legal advice or contact Auckland Regional Council on 09 366 2000.

In determining who may be considered to be adversely affected by a proposal, Section 94B(3) of the Resource Management Act 1991 states:

A person –

- (a) may be treated as not being adversely affected if in relation to the adverse effects of the activity on the person, the [regional] plan permits an activity with that effect; or
- (b) in relation to a controlled or restricted discretionary activity, must not be treated as being adversely affected in the adverse effects on the environment do not relate to a matter specified in the [regional] plan or proposed [regional] plan as a matter for which
 - (i) control is reserved for the activity; or
 - (ii) discretion is restricted for the activity; or
- (c) must not be treated as being adversely affected if it is unreasonable in the circumstances to seek the written approval of that person

In addition, Section 104(3) states that:

A consent authority must not –

- (b) when considering an application, have regard to any effect on a person who has given written approval to the application.

Please note that you do have the right to withdraw your written approval before a hearing or decision on a consent application

The Regional Council shall not have regard to any actual or potential effect on that person if that person has agreed to the proposal which is the subject of the application; and the fact that any such effect on that person may occur shall not be relevant grounds upon which the Regional Council may refuse to grant its consent to the application.

Note: If the Regional Council considers special circumstances exist in relation to an application, it may require the application to be notified even if written approval is obtained from those persons who may be adversely affected.

If you have any queries regarding you affected party status, please contact the consents co-ordinator

Signatures of Person(s) giving Approval

Before signing this form you should read the section Important above

Pursuant to Section 94 of the Resource Management Act 1991, I/we the undersigned hereby declare that I/we give approval to the proposal as described below under Application details:

Name (please print)	Signature	Date
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Please return to

Client Services
Auckland Regional Council
Private Bag 92 012
AUCKLAND

Phone: (09) 366 2000 Fax: (09) 366 2155
If calling from outside the Auckland free call area phone 0800 80 60 40

