

FURTHER SUBMISSION FORM (FORM 6)



PROPOSED PLAN CHANGE TO THE UPPER HUTT CITY COUNCIL DISTRICT PLAN (2004): PROPOSED PLAN CHANGE 45 – SIGNS

File Number: 351/12-050
Submission Number:
(for office use only)

To: Upper Hutt City Council

Further submission **ONLY** in **SUPPORT** or **OPPOSITION** to a submission on publicly notified Proposed Plan Change 45 to the Upper Hutt City Council District Plan (2004).

Submissions can be:

Delivered to: Level 1 Reception, Civic Administration Building, 838-842 Fergusson Drive, Upper Hutt
Posted to: Proposed Plan Change 45, Upper Hutt City Council, Private Bag 907, Upper Hutt
Faxed to: (04) 528 2652
Emailed to: planning@uhcc.govt.nz

The closing date for submissions is 25 October 2018 at 5pm

A copy of your further submission must be served on the original submitter within 5 working days after making the further submission to Council.

***Terms of making a submission**

Upper Hutt City Council is collecting personal information on this form as part of the consultation process. Your name and address will be made public alongside your submission unless you request that your information remain private. Personal information collected will be securely stored by Upper Hutt City Council and only accessed by Council officers who need to access it for the purposes of their role. By submitting this form you agree to these terms.

DETAILS OF SUBMITTER

Name of submitter			
Postal address of submitter			
Agent acting for submitter (if applicable)			
Address for service (if different from above)			
Contact phone number:		Email:	
I am: (Tick appropriate box)	A person representing a relevant aspect of the public interest		(please specify the grounds for meeting this category)
	A person who has an interest in the proposal that is greater than the general public has		(please specify the grounds for meeting this category)
	The local authority for the relevant area		

DETAILS OF FURTHER SUBMISSION

To **SUPPORT** or **OPPOSE** (circle one) the submission of:

(Please state the name and address of the person making the original submission and the submission number).

The particular parts of their submission that I **support** or **oppose** (circle one) are:

(Please clearly indicate which parts of the original submission you support or oppose, together with any relevant provisions of proposed Plan Change 45. Please use additional sheets if necessary).

The reasons for my support or opposition are:

(Please give precise details and use additional sheets if necessary)

I seek that the whole of the submission be **allowed** / **disallowed** (circle one)

OR

I seek that the following parts of the submission be **allowed** or **disallowed** (circle one):

(please give precise details of the parts of the submission that you seek to be allowed or disallowed)

Please indicate whether you wish to be heard in support of your submission (Tick appropriate box)	I do wish to be heard in support of my submission	
	I do not wish to be heard in support of my submission	
Please indicate whether you wish to make a joint case at the hearing if others make a similar submission (Tick appropriate box)	I do wish to make a joint case	
	I do not wish to make a joint case	

SIGNATURE AND DATE

Signature of person making submission or person authorised to sign on behalf of person making submission

Date: _____

(Note: A signature is not required if you are making your submission by electronic means)