

*Please print clearly*

### Location of proposed activity/project

**Describe the location as it is commonly known and in a way that will enable it to be easily identified** eg the street address, the legal description, the name of any relevant stream, river or other water body to which the application relates, proximity to any well known landmark, the grid reference.

**Property Address:**

**Owned by:**

**Legal Description**

**Lot:**

**DPS:**

**Cross Lease/Unit title**

**Flat/Unit:**

**DPS:**

**Legal Area**

**Zoning of the site in the Whakatāne District Plan or Relevant National Environmental Standard (NES)**

### Activities for which the Certificate of Compliance is sought:

### Assessment of Activities against the rules of the Relevant District Plan or NES

### Applicant details

**Applicant name:**

Electronic address for service:

Phone number:

*Include area code*

Mobile number:

Postal address:

### Agent or nominated contact if different from applicant

**Agent or nominated contact name(s):**

Electronic address for service:

Phone number:

*Include area code*

Mobile number:

Postal address:

### Owner/occupier of the land to which the resource consent will apply if different from applicant

**Owner/occupier name(s):**

Electronic address for service:

Phone number:

*Include area code*

Mobile number:

Postal address:

### Addresses for correspondence and payment/invoices

**All correspondence (excluding invoices) sent to:**

Applicant

Agent/nominated contact

Owner/occupier

**Person paying for this consent/invoices will be sent to:**

Applicant

Agent/nominated contact

Owner/occupier

### Site visit requirements

<input type="checkbox"/>	As landowner and with the consent of any occupiers or lessees, I agree to Council staff or authorised consultants visiting the site which is the subject of this application, for the purpose of assessing this application
	Signature: _____ Date: _____
<input type="checkbox"/>	If the applicant is not the land owner please provide details of the landowners or person authorised to sign on behalf of the landowner below:
	Full name
	Contact phone number(s)
Details of any entry restrictions or health and safety concerns in relation to the application site, that Council staff should be aware of, eg dogs, locked gates, chemical spraying etc	

### Information to be submitted with the application

Attach the following information in support of your application. If inadequate information is supplied with your application, this will cause delays in processing the application.

<input type="checkbox"/>	A completed application form including authorisation for site inspection and signed and dated by persons responsible for payment of fees and charges
<input type="checkbox"/>	Site plan
<input type="checkbox"/>	Locality plan or aerial photo at 1:500 scale Indicate the location of the site in relation to the street and other landmarks. Show the street number of the subject site and those of adjoining sites (rural sites can be shown at 1:1000 if required).
<input type="checkbox"/>	Certificates of Title less than 3 months old for the subject site Attach any relevant consent notices, covenants, easements etc attached to the title if relevant or impacted by the use of the property
<input type="checkbox"/>	An assessment of the activity for which the application is made against the relevant district rule(s) or relevant National Environmental Standard showing that the activity can be lawfully established without a resource consent.

### Deposit fee

The required deposit fee must be paid before any processing of the application will start.

I enclose a deposit fee of \$

*Note: The initial lodgement deposit paid on application may not cover the total cost of processing this application. The Council charges for receiving, processing and granting of consents on an actual costs basis. You may receive a refund or an account for additional costs.*

I/We understand that Council may invoice me for the actual and reasonable costs incurred in the processing of this application. Subject to my/our rights under Sections 357B and 358 of the RMA to object to any costs, I/we undertake to pay all and future processing costs incurred by the Council.

Without limiting the Council's legal rights, if any steps, including the use of debt collectors, are necessary to recover unpaid processing costs, I/we agree to pay all costs of recovering those processing costs.

If this application is made on behalf of a trust (private or family), a society (incorporated or unincorporated) or a company, in signing this application I/we are binding the trust, society or company to pay all of the above costs and guaranteeing to pay all the above costs in my/our personal capacity.

Payments can be deposited into bank account: 01 0434 0334411 00. Please include the following reference details;  
Particulars: RC. Code: property address. Reference: your surname.

### Signature

Applicant's full name *(please print)*

Signature of applicant (or person authorised to sign on behalf of Applicant)	Date
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Office use only		
Office use only		
Date & time received	Receipt No.	Application No.

**Criteria for acceptance: Counter Applications**

*Tick as appropriate*

Application	Yes	No
Application Details completed in full	<input type="checkbox"/>	<input type="checkbox"/>
Legal Description	<input type="checkbox"/>	<input type="checkbox"/>
Address for Service	<input type="checkbox"/>	<input type="checkbox"/>
Assessment against District Plan or NES	<input type="checkbox"/>	<input type="checkbox"/>
Check that plans drawn to scale indicate:		
* Site plan that identifies the property boundaries	<input type="checkbox"/>	<input type="checkbox"/>
* Any other buildings (highlighting the proposed building)	<input type="checkbox"/>	<input type="checkbox"/>
* Distances to boundaries (between all structures and boundaries)	<input type="checkbox"/>	<input type="checkbox"/>
* Vehicle entrance, turning circle, and onsite manoeuvring	<input type="checkbox"/>	<input type="checkbox"/>
* Floor plan(s)	<input type="checkbox"/>	<input type="checkbox"/>
* Identification of topography	<input type="checkbox"/>	<input type="checkbox"/>
* Certificate of Title	<input type="checkbox"/>	<input type="checkbox"/>
Elevation Drawings or if the building is being re-sited, photos	<input type="checkbox"/>	<input type="checkbox"/>
If Māori land – evidence of right to build	<input type="checkbox"/>	<input type="checkbox"/>
Application fee of \$.....	<input type="checkbox"/>	<input type="checkbox"/>

Note: If any criteria indicates "NO", the application may be incomplete (Section 88(3) RMA 1991)

Planner's assessment		
	Yes	No
Is the application complete?	<input type="checkbox"/>	<input type="checkbox"/>
If incomplete the reasons are:		