

## Notice of Requirement for Designation or Alteration to Designation

### Application made under Section 168(1)-(2) of the Resource Management Act 1991

To: RMA Consents  
 Whangarei District Council  
 Private Bag 9023  
 Whangarei 0148

[consentsadmin@wdc.govt.nz](mailto:consentsadmin@wdc.govt.nz)

Office Use only	
Date Received:	
Time received:	
Payment Received:	
Tech 1 App #:	
Property #:	
Land #:	
Planner:	
Engineer:	

*This form is designed to provide us with your contact information and details about your proposal that are required for us to process your application. If you fail to complete this form and provide the necessary information, including the deposit fee, your application may not be accepted for processing. Prior to paying your deposit fee you may request an invoice from us.*

#### 1 Application Details

Full Name of Applicant: \_\_\_\_\_

Postal address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**I / we give notice of a requirement for:**

designation

alteration to a designation

#### 2 The Site

Physical address: \_\_\_\_\_

Legal description(s): \_\_\_\_\_

Other: \_\_\_\_\_

Is there a locked gate or security system restricting access?  Yes /  No

Are there any entry restrictions or hazards that Council staff should be aware of?  Yes /  No

*If yes, please provide details so Council staff can take the necessary precautions:*

\_\_\_\_\_  
 \_\_\_\_\_

#### 3 The Proposal

*Describe the nature of the proposed public work (or project or work):*

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Select the statement that applies:

There are no proposed conditions that would apply to the public work (or project work) to which this application relates.

There are proposed conditions that would apply to the public work (or project work) to which this application relates.

Outline the nature of the proposed conditions (or reference details in the application material)

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### 3 Other Consents

Select the statement that applies:

No resource consents are needed for the public work (or project or work) to which this application relates.

Resource consents are needed for the public work (or project or work) to which this application relates and have/have not (delete one) been applied for.

Provide details as applicable:

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I have / have not (select one) applied for a building consent or PIM for the public work (or project work) to which this application relates.

Building consent / PIM reference: \_\_\_\_\_

### 4 Information Requirements

Have you attended a pre-application meeting in relation to this Application?  Yes /  No

The effects the public work (or project or work) will have on the environment, and the ways in which any adverse effects will be mitigated, are outlined in the application material attached:  Yes /  No

Alternative sites, routes, and methods have been considered, with the extent of this consideration detailed in the application material attached:  Yes /  No

The public work (or project or work) and designation (or alteration) are reasonably necessary for achieving the objectives of the requiring authority, and the reasons for this are outlined in the application material attached:  Yes /  No

Consultation has been undertaken with parties that are likely to be affected by the public work (or project work), with details provided in the Application material attached:  Yes /  No

**I attach:**

- Assessment of environmental effects
- Assessment of alternative sites, routes, and methods
- Details of consultation
- Certificate of title and relevant interests
- Plans detailing the location and extent of any proposed works
- Other information or specialist reports (*please list*)

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**5 Declaration of Applicant or Authorised Agent**

**Fees and Charges:**

*You will be responsible for payment of all actual and responsible costs of processing the application.*

*You are required to pay an advance fee deposit at time of lodgement. Please refer to Council's 'Schedule of Fees and Charges' found here: [www.wdc.govt.nz/FeesandCharges](http://www.wdc.govt.nz/FeesandCharges).*

*See here for payment options: [www.wdc.govt.nz/PayIt](http://www.wdc.govt.nz/PayIt). Please quote the type of application and name of the Applicant when making your payment.*

*The processing charge covers tasks such as site visits, report preparation, information searches, and input from other Council staff including engineers. Mileage is also charged.*

*You will be invoiced for any outstanding costs associated with processing the application when a decision on your application is issued. In some cases, interim billing for processing costs may also occur.*

**Privacy Information:**

*Council requires the information you have provided on this form to process your application and to collect statistics. Council will hold and store the information, including all associated reports and attachments, on a public register. The details may also be made available to the public on Council's website. These details are collected to inform the general public and community groups about all consents which have been processed or issued through Council. If you would like to request access to, or correction of any details, please contact Council.*

**Site Visit:**

*By signing this form, you confirm that Council is permitted to undertake a site inspection(s).*

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**Applicant Declaration:** (required where authorised agent is not acting on your behalf)

I / we confirm that I / we have read and understood the above.

Subject to rights to object to or appeal a decision on costs under section 357B and section 358 of the Resource Management Act 1991, I undertake to pay all costs associated with this application. I also agree to pay all the costs (including debt collection or legal fees) of recovering any unpaid costs.

Applicant name: \_\_\_\_\_

Applicant signature \_\_\_\_\_ Date: \_\_\_\_\_

Applicant name: \_\_\_\_\_

Applicant signature \_\_\_\_\_ Date: \_\_\_\_\_

**Authorised Agent Declaration:**

As authorised agent for the Applicant, I confirm that I have read and understood the above information and have fully informed the Applicant of their obligations in connection with this application, including obligations relating to payment of fees and other charges. I confirm that I have the Applicant's authority to sign this application on their behalf.

Agent's signature \_\_\_\_\_ Date: \_\_\_\_\_

Name of agent: \_\_\_\_\_

Company name \_\_\_\_\_ Reference: \_\_\_\_\_

Postal address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**6 Address for Service**

Please send all correspondence to (select one):

- The Applicant
- The Authorised Agent
- Other (*please provide details*)

Full Name: \_\_\_\_\_

Postal address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_