# Existing Use Rights Certificate Application Form

Section 139A of the Resource Management Act 1991 (RMA). This form provides us with your contact information and details about your application. Please print clearly and complete all sections.

## Note to applicant:

You must include all information required by this form. The information must be specified in sufficient detail to satisfy the purpose for which it is required.

# Please print clearly and complete all sections.

To: Name of Council that is the consent authority for this application: Select a Council

# **Applicant Name**

Please provide the full name of the persons, company, society or trust applying for this certificate. If the applicant is a trust, please provide the full name/s of all trustees of that trust.

# **Applicant Contact Details**

Postal Address:		
Post code:	Email:	
Phone:	Mobile:	

#### **Agent Contact Details**

If you have an agent or other person acting on your behalf, please complete the details below.

Hamilton

City Council









Waikato

District

Council







# V1 | 01/04/20

Agent:		
Contact:		
Postal Address:		
Post code:	Email:	
Phone:	Mobile:	

# Location of land use for which Existing Use Certificate is sought

Please complete with as much detail as you can, so the location of land use is clearly identifiable. Include details such as unit number, street number, street name and town.

Property address:

Legal description:

# **Owner/Occupier of site**

Landowner's full name, phone number and address:

OR

□ Same as applicant details

Occupier's full name, phone number and address:

OR

# □ Same as applicant details

#### **Description of existing land use**

Please provide a brief description of the existing land use.

## Assessment of existing land use

Please attach all information contained in "Information Checklist for Application for Existing Use Certificate". This checklist is available on Council's website.

## **Pre-application information**

We recommend that you have a pre-application discussion about your application with a Council planner.

Have you had a pre	e-application meeting with a Council planner?	☐ Yes	□ No	
Have you had any o	other conversations with any other Council staff?	Ves	□ No	
Date of meeting:				
Please provide the names of Council staff you have spoken with.				

If notes of the meeting or other conversations were provided to you, please attach copies.

Have you attached any minutes/notes from the meeting?

Yes	No
163	110

#### Site visit requirements

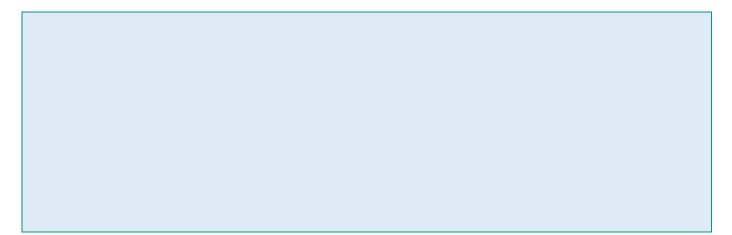
As landowner and with the consent of any occupiers or lessee, I am aware that Council staff or authorised consultants will visit the site which is the subject of this application for the purposes of assessing this application, and agree to a site visit.

OR

If the applicant is not the landowner, I understand that Council staff or authorised consultants will visit the site, which is the subject of this application, for the purposes of assessing this application, and agree to a site visit.

Is there a locked gate or security system restricting access by Council staff?	Yes	🗆 No
Are there any dogs on the property?	☐ Yes	🗆 No
Are there any hazards that may place a visitor at risk?	□ Yes	🗆 No

Provide details of any entry restrictions that Council staff should be aware of e.g. health and safety, organic farm etc.



## Signature of the Applicant(s) or Agent

Please read before signing the application form.

#### Payment of fees and charges

You must pay the charges payable to Council for this application under the RMA. Please refer to Council's Fees and Charges on its website.

By submitting this application to Council, you agree to pay the charges set out in Council's Fees and Charges relevant to the application.

#### **Privacy information**

Council requires the information you have provided on this form to process your application under the RMA. Council will hold and store the information on a pubic register. The details may also be made available to the public on the Council's website. If you would like to request access to, or correction of any details, please contact the Council.

#### **Correspondence and invoices**

Please let us know where to send any correspondence and invoices. Where possible any correspondence will be sent by email.

All correspondence excluding invoices sent to:

□ Applicant or □ Agent

#### All invoices sent to:

Applicant	or	🗌 Agent
	01	

Confirmation by the applicant

I/we confirm that I/we have read and understood the information and will comply with our obligations as set out above. (A signature is not required if you submit this form electronically.)

Applicant name:	Signature:	Date:	
Applicant name:	Signature:	Date	
Applicant name:	Signature:	Date	

# Confirmation by the agent authorised to sign off on behalf of the applicant

As authorised agent for the applicant, I confirm that I have read and understood the above information and confirm that I have fully informed the applicant of its/their obligations in connection with this application, including for fees and other charges, and that I have the applicant's authority to sign this application on its/their behalf. (A signature is not required if you submit this form electronically.)

Agent's name:	Signature:	Date:	