



# WAIROA DISTRICT COUNCIL

## REGULATORY DEPARTMENT

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### APPLICATION FOR A CERTIFICATE OF COMPLIANCE PURSUANT TO SECTION 139 OF THE RESOURCE MANAGEMENT ACT 1991

#### Completing This Form:

This form provides us with your contact details and details about your proposed activity. It also explains the effects of your proposed activity on the environment. Please take note that all the information provided in your application once granted is made available to the public.

We recommend that you talk your proposal through with Council's planning staff **before** you fill in this form. You should also contact us if you are unsure what forms you should be using, or if you need help with filling in certain aspects of any form. We can be contacted on (06) 8387309.

**It is important that you answer all questions fully.**

#### Fees

A deposit fee of \$200.00 is required before your application will be processed. Please note that the Wairoa District Council recovers the full cost of processing Certificate of Compliance applications in accordance with Section 36 of the Resource Management Act 1991. This means that you will receive an invoice for any costs over and above the deposit fee. Generally you will be invoiced once the application has been determined, however if the application is complex, you may be invoiced in stages.

#### Contact Details

Applicant(s) name(s) (in full) and address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Daytime Phone: \_\_\_\_\_  
Mobile phone: \_\_\_\_\_  
Email: \_\_\_\_\_  
Fax number: \_\_\_\_\_

Service name and address for contact during the application process (if different from above):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Daytime Phone: \_\_\_\_\_  
Mobile phone: \_\_\_\_\_  
Email: \_\_\_\_\_  
Fax number: \_\_\_\_\_

Billing name and address for invoices and annual charges (if different from above):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Daytime Phone: \_\_\_\_\_  
Mobile phone: \_\_\_\_\_  
Email: \_\_\_\_\_  
Fax number: \_\_\_\_\_

Property owner's name and address (if different from above):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Daytime Phone: \_\_\_\_\_  
Mobile phone: \_\_\_\_\_  
Email: \_\_\_\_\_  
Fax number: \_\_\_\_\_

#### Location Of The Activity

Location of the activity and/or property address: \_\_\_\_\_

Valuation Reference (from your rates notice): \_\_\_\_\_

Legal Description (from your rates notice): \_\_\_\_\_

#### Detailed Description of the Activity or Works Proposed

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

