

OFFICE USE ONLY

Submission number

PROPOSED PLAN CHANGE TO THE UPPER HUTT CITY COUNCIL DISTRICT PLAN

Proposed Plan Change 47—Natural Hazards

The closing date for submissions is Friday, 4 November 2022, at 5.00 pm

To Upper Hutt City Council

Submission on Proposed Plan Change 47 to the Upper Hutt City Council District Plan

Deliver to: HAPAI Service Centre, 879 – 881 Fergusson Drive, Upper Hutt 5019

Post to: Planning Policy Team, Upper Hutt City Council, Private Bag 907, Upper Hutt 5140

Scan and email to: planning@uhcc.govt.nz

Details of submitter

When a person or group makes a submission or further submission on a Proposed Plan Change this is public information. By making a submission your personal details, including your name and addresses, will be made publicly available under the Resource Management Act 1991. This is because, under the Act, all submissions must be published to allow for further submission on the original submission. There are limited circumstances when your submission or your contact details can be kept confidential. If you consider you have reasons why your submission or your contact details should be kept confidential, please contact the Planning Team via email at *planning@uhcc.govt.nz*.

NAME OF SUBMITTER		
POSTAL ADDRESS OF SUBMITTER		
AGENT ACTING FOR SUBMITTER (IF APPLICABLE)		
ADDRESS FOR SERVICE (IF DIFFERENT FROM ABOVE)		
CONTACT TELEPHONE	CONTACT EMAIL	
I could gain an advantage in trade competition through this submission (please tick one ④): yes 〇/ 〇 no		
Only answer this question if you ticked 'ye	s' above:	
l am) /) am not (tick one ⊘) dire	ectly affected by an effect of the subject matter of the submission that:	

- (a) adversely affects the environment; and
- (b) does not relate to trade competition or the effects of trade competition.

Details of submission

The specific provisions of the proposed Plan Change that my submission relates to are as follows:

USE ADDITIONAL PAPER IF NECESSARY

My submission is that:

PLEASE STATE IN SUMMARY THE NATURE OF YOUR SUBMISSION. CLEARLY INDICATE WHETHER YOU SUPPORT OR OPPOSE THE SPECIFIC PROVISIONS OR WISH TO HAVE AMENDMENTS MADE, GIVING REASONS. PLEASE USE ADDITIONAL PAPER IF NECESSARY

I seek the following decision from the local authority:

	PLEASE GIVE PRECISE DETAILS AND USE ADDITIONAL PAPER IF NECESSARY
Please indicate whether you wish to be heard in support of your submission (tick appropriate box Ø):	I do wish to be heard in support of my submission.
	OI 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 Ø):	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: