# SUBMISSION FORM (FORM 5)



### PROPOSED PLAN CHANGE TO THE UPPER HUTT CITY COUNCIL DISTRICT PLAN:

#### PROPOSED PLAN CHANGE 40 - WALLACEVILLE

To: Upper Hutt City Council

File Number: 351/13/008 Submission Number: (for office use only)

Submission on Proposed Plan Change No.40 to the Upper Hutt City Council District Plan

Submissions can be:

Delivered to: Level 2 Reception, Civic Administration Building, 838-842 Fergusson Drive, Upper Hutt Proposed Plan Change No.40, Upper Hutt City Council, Private Bag 907, Upper Hutt

Posted to: Faxed to:

(04) 528 2652

Emailed to:

askus@uhcc.govt.nz

The closing date for submissions is 5.00pm on Friday 17 April 2015

### **DETAILS OF SUBMITTER**

| Name of submitter   | New Zealand Defence Force<br>Attn: Rob Owen, Environmental Manager |             |  |  |  |  |
|---|--|-------------|--|--|--|--|
| Postal address of submitter                                 | c/o Tonkin & Taylor<br>PO Box 2083, Wellington 6140                |             |  |  |  |  |
| Agent acting for submitter (if applicable)                  | Tonkin & Taylor Attn: Sara McMillan sara.mcmillan@nzdf.mil.nz      |             |  |  |  |  |
| Address for service (if different from above)               |  |             |  |  |  |  |
| Contact phone/fax<br>number                                 | Daytin<br>Teleph   | ne<br>none: | 021-826-706 (Sara)   |  |  |  |
| I could gain an<br>advantage in trade                       | NO   | X           | Only answer this question if you ticked YES:   |  |  |  |
| competition through this<br>submission<br>(Please tick one) | YES  |             | I am / am not (select one) directly affected by an effect o subject matter of the submission that: (a) adversely affects the environment; and (b) does not relate to trade competition or the effects of transpection. |  |  |  |

# **DETAILS OF SUBMISSION**

| The specific provisions of the proposed Plan Change that my submission relates to are as follows: The plan change in its entirety.   |   |                    |  |  |
|--|---|--------------------|--|--|
|  |   |                    |  |  |
|  |   |                    |  |  |
|  |   |                    |  |  |
|  |   |                    |  |  |
|  |   |                    |  |  |
|  |   |                    |  |  |
| My submission is that: The Wallaceville site lies immediately to the proposed rezoning will result in increased de therefore has the potential to result in advers   | evelopment close to NZDF's existing facility  | . and              |  |  |
| NZDF and the applicant's agent have an agr in favour of NZDF to be registered on the he resulting from subdivision. Once the covenar title, NZDF intend to withdraw this submission. This is a neutral submission. | reement in principle for a 'no complaints' co<br>ad title, which would be brought onto all ne<br>nt has been agreed and formally registered | venant<br>w titles |  |  |
| (Please state in summary the nature of your subm<br>the specific provisions or wish to have amendmen<br>if necessary)  | ission. Clearly indicate whether you support or<br>nts made, giving reasons. Please use additional  | oppose<br>I sheets |  |  |
| I seek the following decision from the local author<br>Subject to the covenant referred to above be<br>does not oppose the proposed plan change.   | eing formally registered on the head title, Na  | ZDF                |  |  |
|  |   | *                  |  |  |
|  |   |                    |  |  |
|  |   |                    |  |  |
|  |   |                    |  |  |
|  |   |                    |  |  |
| (Please give precise details and use additional she  | eets if necessary)<br>I   |                    |  |  |
| Please indicate whether you wish to be heard in support of your submission (Tick appropriate box)  | I <b>do</b> wish to be heard in support of my submission  | Х                  |  |  |
| ·  | I <b>do not</b> 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  | I <b>do</b> wish to make a joint case   | Х                  |  |  |
|  |   |                    |  |  |

| submission (Tick appropriate box)  | I <b>do not</b> wish to make a joint case            |
|--|--|
| SIGNATURE AND DATE   |  |
| Mlu  |  |
| signature of person making submission or possibilities of person of person or possibilities of person or possibilities of person or possibilities of person or possibilities of person of person or possibilities of person or possibilities of person or possibilities of person or | person authorised to sign on behalf of person making |
| Date Date  |  |
| (Note: A signature is not required if you are  | e making your submission by electronic means)        |

PLEASE NOTE THAT THE INFORMATION PROVIDED IN YOUR SUBMISSION, INCLUDING YOUR CONTACT DETAILS, WILL BE AVAILABLE TO THE PUBLIC