

- 8 MAY 2017

SUBMISSION FORM (FORM 5)

**PROPOSED PLAN CHANGE TO THE UPPER HUTT CITY COUNCIL
DISTRICT PLAN: PROPOSED PLAN CHANGE 42 – MANGAROA AND
PINEHAVEN FLOOD HAZARD EXTENTS**



File Number: 351/12/046
Submission Number:
(for office use only)

To: Upper Hutt City Council

Submission on Proposed Plan Change 42 to the Upper Hutt City Council District Plan

Submissions can be:

Delivered to: Level 1 Reception, Civic Administration Building, 838-842 Fergusson Drive, Upper Hutt
Posted to: Proposed Plan Change 42, Upper Hutt City Council, Private Bag 907, Upper Hutt
Faxed to: (04) 528 2652
Emailed to: planning@uhcc.govt.nz

The closing date for submissions is 8 May 2017 at 5pm

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

DETAILS OF SUBMITTER

Name of submitter	Geoff Workman		
Postal address of submitter	29 Elmslie Rd Pinehaven		
Agent acting for submitter (if applicable)			
Address for service (if different from above)	Please indicate if you wish email to be the authorised method of service: YES/NO geoff.workman@hotmail.com		
Contact phone / email	Telephone:	Email:	
geoff.workman@hotmail.com	045285008		
I could gain an advantage in trade competition through this submission (Please tick one)	NO	Only answer this question if you ticked YES: I am / am not (select one) directly 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.	
	YES		

DETAILS OF SUBMISSION

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

Incorrect information

(Please use additional sheets if necessary)

My submission is that:

The council use correct and true information not false and incorrect information to establish the flood maps. You are sworn in to act in truth so stop over riding the facts & truth that is presented

(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 sheets if necessary)

I seek the following decision from the local authority:

A indenpant audit emlimating the false information so don't reuse data from a lie detector which is clearly wrong. This information is distorted untrue and is used to mislead those affected

(Please give precise details and use additional sheets if necessary)

Please indicate whether you wish to be heard in support of your submission (Tick appropriate box)

I **do** wish to be heard in support of my submission

I **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)

I **do** wish to make a joint case

I **do not** wish to make a joint case

SIGNATURE AND DATE

J. P. Waples

 Signature of person making submission or person authorised to sign on behalf of person making submission

Date: _____
 (Note: A signature is not required if you are making your submission by electronic means)