

APPLICATION FOR DEEMED PERMITTED BOUNDARY ACTIVITY

Section 87BA, Resource Management Act 1991 (Form 9A)

TO HASTINGS DISTRICT COUNCIL

APPLICANT'S DETAILS

FIRST NAME:	
SURNAME NAME:	
ADDRESS:	

I hereby supply the information required for a deemed permitted boundary activity under section 87BA of the Resource Management Act 1991 (the Act) to be undertaken at:

FULL LEGAL ADDRESS OF THE PROPERTY WHERE THE BOUNDARY ACTIVITY IS TO OCCUR

ADDRESS:	

THE DESCRIPTION OF THE BOUNDARY ACTIVITY IS

Please provide a description of the activity in sufficient detail for the consent authority to be satisfied the activity is a permitted boundary activity under section 87AAB of the Act.

- I attach a plan/s (drawn to scale) of the site at which the activity is to occur, showing the height, shape, and location on the site of the proposed activity.

NAME AND ADDRESS OF EACH OWNER (OTHER THAN THE APPLICANT) OF THE SITE TO WHICH THE PROPOSED ACTIVITY RELATES

FIRST NAME:	
SURNAME NAME:	
ADDRESS:	

FIRST NAME:	
SURNAME NAME:	
ADDRESS:	

FIRST NAME:	
SURNAME NAME:	
ADDRESS:	

NAME AND ADDRESS OF EACH OWNER OF AN ALLOTMENT WITH AN INFRINGED BOUNDARY TO WHICH THE PROPOSED ACTIVITY RELATES

FIRST NAME:	
SURNAME NAME:	
ADDRESS:	

FIRST NAME:	
SURNAME NAME:	
ADDRESS:	

FIRST NAME:	
SURNAME NAME:	
ADDRESS:	

- I attach written approval (Form 8B) and a signed plan/s from each owner of an allotment with an infringed boundary.

SIGNATURE:	
PRINTED NAME:	
DATE:	

NOTE: A signature is not required if you provide your information by electronic means
(note that the plans do need to be signed)

CONTACT DETAILS OF PERSON SUBMITTING APPLICATION

EMAIL ADDRESS:	
PHONE:	
POSTAL ADDRESS: <i>(or alternative method of service under section 352 of the Resource Management Act 1991)</i>	
CONTACT PERSON DESIGNATION, IF APPLICABLE:	