

District Plan Further Submission Form

in support of or in opposition to a submission
Proposed Hauraki Gulf Islands Section 2006

Please print clearly		For office use only									
Full name: ARTHUR DAVIES		Submission No.									
Organisation: (if the submission is on behalf of an organisation)		2030									
Agent: (if applicable)		<div style="border: 1px solid black; padding: 5px;"> <p>RECEIVED</p> <p>28 MAY 2007</p> <p><i>JD</i></p> </div>									
Address for correspondence: PO BOX 22 OKIWI											
Phone: (business)	(home)			(fax)							
e-mail address:											
Please use a separate form for each separate matter for submission											
I / We support <input type="checkbox"/> / oppose <input checked="" type="checkbox"/> the submission of: <small>(name and address of original submitter and submission number of original submission if available)</small>											
John Ogden and Jenn Ogden 123 Aotea Road Great Barrier Island.											
			Submission number 3051/2								
The particular parts of the above submission which I / we support <input type="checkbox"/> / oppose <input checked="" type="checkbox"/> are: <small>(clearly indicate which parts of the original submission you support or oppose, together with any relevant provisions of the proposal)</small>											
The submission in its entirety											
The reasons for my / our support or opposition to the above submission are: I am against removing the O'Shea Road designation on sheet 50 map 2. It is a legal lawful public road there are 8 lots who need it for access and egress to their land:											
I / We seek <table style="display: inline-table; vertical-align: top;"> <tr> <td><input type="checkbox"/></td> <td>the whole submission be allowed</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>the whole submission be disallowed</td> </tr> <tr> <td><input type="checkbox"/></td> <td>part of the submission be allowed</td> </tr> <tr> <td><input type="checkbox"/></td> <td>part of the submission be disallowed</td> </tr> </table>				<input type="checkbox"/>	the whole submission be allowed	<input checked="" type="checkbox"/>	the whole submission be disallowed	<input type="checkbox"/>	part of the submission be allowed	<input type="checkbox"/>	part of the submission be disallowed
<input type="checkbox"/>	the whole submission be allowed										
<input checked="" type="checkbox"/>	the whole submission be disallowed										
<input type="checkbox"/>	part of the submission be allowed										
<input type="checkbox"/>	part of the submission be disallowed										
I / We wish to be heard at the council planning hearing		Yes	No								
I / We would be prepared to present a joint case at the hearing with any others making a similar submission		Yes <input checked="" type="checkbox"/>	No								
Signed A Davies		Date 26-5-7									