

District Plan Further Submission Form

in support of or in opposition to a submission

<p><small>Please print clearly</small></p> <p>Full name: <u>Kristin Lowe</u></p> <p>Organisation: (if the submission is on behalf of an organisation)</p> <p>Agent: (if applicable)</p> <p>Address for correspondence: <u>PO Box 16, Port Fitzroy, Gt Barrier Island</u></p> <p>Phone: (business) <u>09 429 0401</u> (home) <u>09 429 0347</u> (fax) <u>09 429 0847</u></p> <p>e-mail address:</p>	<p><small>For office use only</small></p> <p>Submission No.</p> <h2 style="font-size: 2em;">2338</h2> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p>FILED</p> <p>28 MAY 2007</p> </div>						
<p>This is a submission on the following plan modification (state plan modification name and number):</p>							
<p>Please tick the section of the district plan your submission relates to:</p> <table style="width: 100%;"> <tr> <td><input type="checkbox"/> 1999 Operative Isthmus Section</td> <td><input type="checkbox"/> Transitional Operative District Plan (former Auckland District Scheme)</td> </tr> <tr> <td><input type="checkbox"/> 1996 Operative Hauraki Gulf Islands Section</td> <td><input type="checkbox"/> 2004 Operative Central Area Section</td> </tr> <tr> <td><input checked="" type="checkbox"/> 2006 Proposed Hauraki Gulf Islands Section</td> <td></td> </tr> </table>		<input type="checkbox"/> 1999 Operative Isthmus Section	<input type="checkbox"/> Transitional Operative District Plan (former Auckland District Scheme)	<input type="checkbox"/> 1996 Operative Hauraki Gulf Islands Section	<input type="checkbox"/> 2004 Operative Central Area Section	<input checked="" type="checkbox"/> 2006 Proposed Hauraki Gulf Islands Section	
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<input type="checkbox"/> 1996 Operative Hauraki Gulf Islands Section	<input type="checkbox"/> 2004 Operative Central Area Section						
<input checked="" type="checkbox"/> 2006 Proposed Hauraki Gulf Islands Section							
<p>Please use a separate form for each separate matter for submission</p>							
<p>I / We support <input type="checkbox"/> / oppose <input checked="" type="checkbox"/> the submission of:</p> <p><small>(name and address of original submitter and submission number of original submission if available)</small></p> <p><u>John Ogden</u></p> <p style="text-align: right;">Submission number <u>3597</u></p>							
<p>The particular parts of the above submission which I / we support <input type="checkbox"/> / oppose <input checked="" type="checkbox"/> are:</p> <p><small>(clearly indicate which parts of the original submission you support or oppose, together with any relevant provisions of the proposal)</small></p> <p><u>The submission in its entirety</u></p> <p style="text-align: right;"><small>I have attached additional information</small> Yes No <input checked="" type="checkbox"/></p>							
<p>The reasons for my / our support or opposition to the above submission are:</p> <p><u>That ownership of dogs + cats are to remain permitted by landowners</u></p> <p style="text-align: right;"><small>I have attached additional information</small> Yes No</p>							
<p>I / We seek that the whole/or part (describe part) of the submission be <u>allowed/disallowed</u>:</p> <p><u>whole submission 12.3</u></p> <p style="text-align: right;"><small>I have attached additional information</small> Yes No <input checked="" type="checkbox"/></p>							
<p>I / We wish to be heard at the council planning hearing</p> <p style="text-align: right;">Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/></p>							
<p>I / We would be prepared to present a joint case at the hearing with any others making a similar submission</p> <p style="text-align: right;">Yes No</p>							
<p>Signed <u>Kristin Lowe</u></p>	<p>Date <u>24/5/07</u></p>						