

District Plan Further Submission Form

in support of or in opposition to a submission

Please print clearly		For office use only		
Full name: <u>MICKEY PATRICK O'SHEA OF AWANA</u>		Submission No		
Organisation: (if the submission is on behalf of an organisation)		<u>2342</u>		
Agent: (if applicable)		<div style="border: 1px solid black; padding: 5px; text-align: center;"> <p>28 MAY 2007</p> </div>		
Address for correspondence: <u>BOX 9 CLARIS GREGAT BARRIER ISLAND</u>				
Phone: (business)	(home) <u>4290140</u>			(fax)
e-mail address:				
This is a submission on the following plan modification (state plan modification name and number):				
Please tick the section of the district plan your submission relates to:				
<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				
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: <u>John Ogden</u>				
<i>(name and address of original submitter and submission number of original submission if available)</i>				
		Submission number <u>3597/1</u>		
The particular parts of the above submission which I / we support <input type="checkbox"/> / oppose <input checked="" type="checkbox"/> are:				
<i>(clearly indicate which parts of the original submission you support or oppose, together with any relevant provisions of the proposal)</i>				
<u>The submission in its entirety</u>				
		I have attached additional information Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
The reasons for my / our support or opposition to the above submission are:				
<u>that ownership of dogs + cats are to remain permitted</u>				
		I have attached additional information Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
I / We seek that the whole/or part (describe part) of the submission be allowed/disallowed: <input checked="" type="checkbox"/>				
		I have attached additional information Yes <input type="checkbox"/> No <input type="checkbox"/>		
I / We wish to be heard at the council planning hearing		Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
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 <input type="checkbox"/>	
Signed <u>Michael O'Shea of Awana</u>		Date <u>25/2007</u>		