Rangitikei District Council

Postal Address: Private Bag 1102, Marton Street Address: 46 High Street, Marton

Phone: 06 327 0099 Freephone: 0800 422 522 Fax: 06 327 6970 Email: info@rangitikei.govt.nz Website: www.rangitikei.govt.nz



FORM 5 – SUBMISSION ON PROPOSAL TO CHANGE THE RANGITIKEI DISTRICT PLAN

Proposed zoning of 217 hectares of rural land near Marton to industrial

Clause 6 of the First Schedule, Resource Management Act 1991

	S	UBMITTER/S	S DETAILS	
Full Name	LORRAINE	PEA	RSON	RECEIVE
	71 MARIL		the same	2 3 SEP 2019
	MAR	TON		To: MH
				File: (- (-
Business Phone		<u>_</u>	Fax Numbe	Doc:
Private Phone _			Email	
Mobile Phone _	027 25159	56		
Contact				
Person				
Person				
Address				7.,
Phone Number (if different fron	n above)			
		SUBMIS	SION	
☐ I support the	application	۱۵	oppose the applica	tion
My submission	is (specific parts of the	plan change	proposal; whether	you wish to have the
proposal amend	ded; the reasons for yo	ur views)	AS A SCHO	OOL BUS DRIVER
IAM VO	ERY CONSCIO	as of.	PHE EXTRA	HEAVY TRAFFIC
naind No	JA TAWA ROAD	gwings	LINE, THE	E CONDITION OF
BEING DO	NE ONLY TO	FIND	THE NEXT 7	HE DAY THEY
	og Again.			/ (

MANY TIMES I HAVE	HAD TO PRIVE OVER ON THE GRASS
	VY VEHICLES, WHEN FLOODING
	PAIL BRIDGE ON STATE HIGHWAY ONE
THE TRAFFIC OF THE	BY PASS INCREASES 10 FOLD.
IF THE CONTINUAL REP	AIR COSTS ARE COMING OUT OF OU
	HEN ITS TIME THE COSTS
	(continue on a separate sheet if necessary)
I seek the following decision from the	Rangitikei District Council (give precise details)
	0272515956
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	,
☐ I wish to be heard in support of my	submission
I do not wish to be heard in suppor	t of my submission
☐ If others make a similar submission	, I will consider presenting a joint case with them at a
hearing	
Signature	Date
(Person making the submission, or the to sign on behalf of the person making A signature is not required if you make your su	g the submission)

Please make sure the submission is received by the Council before the due date – i.e. 23 September 2019, 5.00 pm.