



FORM Request for resource consent pre-application meeting

Applicant details			Tick here if N/A
Full name			
Company name	First name(s)	Surname	
Postal address			
Contact email			
Contact phone		Mobile phone	
Invoice to this address	0	cale p.cale	
Application site de	tails		
Site/street address			
Town/location			
Legal description (from your rates notice or Record of Title)			
Previous advice			Tick here if N/A
Are there any previous reference numbers be	s applications that may have relevance to	o this pre-application meeting request? P	lease list any relevant
Description of the	nyonagad activity		
Description of the	proposed activity		
Additional sheets			
attached	Number of sheets		
OFFICE USE ONLY			
Date received	Time received	Received by	

Liardet Street, Private Bag 2025, New Plymouth 4340, New Zealand. Telephone 06-759 6060, Email enquiries@npdc.govt.nz, Website www.npdc.govt.nz

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Applicant		
_		
Agent	Email address	
Other		
Other	Email address	
Other	Email address	
ı	Email address	
Other	Email address	
pecific adv	ice sought	
		re seeking advice on e.g. planning, building, engineering, noise, traffic. This v
olp the Servi	ces Supervisor determine what to	echnical experts may be required to attend any meeting (if required).
ease list any	relevant rules and their complia	nce status you may have identified relating to your proposal.
Rule	Name	Compliance status
ocuments	attached	Tick here if I
Occuments Scheme		Tick here if I
		Tick here if I
Scheme		Tick here if I
Scheme Other Other		Tick here if I
Other Other Other		Tick here if I
Scheme Other Other		Tick here if I
Other Other Other		Tick here if I

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Applicant's declaration

I/We understand that the Council may charge me/us all costs that are actually and reasonably incurred in the processing of this pre-application meeting request. Without limiting New Plymouth District Councils legal rights, if any actions are necessary to recover unpaid processing costs or fees associated with this pre-application meeting request, including debt recovery fees, I/we agree to pay all costs of recovering those costs.

If this application is made on behalf of a company, society (incorporated or unincorporated) or trust, in signing this application I/we acknowledge that:

- I am/we are authorised to make this application on behalf of that company, society or trust; and
- The company, society or trust will pay the actual and reasonable costs of processing the application, including any debt recovery costs.

By signing this form, I hereby certify that, to the best of my knowledge and belief, the information given in this application is true and correct.

Signature of applicant or agent

Date

Name and role (please print)

The information you will receive from Council is limited to the information you provide in this application, any further information you may supply at a pre-application meeting, and which is relevant to the provisions of any plan or proposed plan in existence at the time of the pre-application meeting. Council does not accept any legal liability for any advice or view expressed by Council at the pre-application meeting and any advice or view expressed is subject to further reconsideration by Council after the application is lodged. Prior to lodging any application under s88 of the RMA, applicants are advised to seek their own independent advice in relation to all matters covered by the pre-application meeting, and in the event the proposal changes or there is a delay in lodging any application.

Email completed form to resourceconsentsadmin@npdc.govt.nz

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