PROPOSED WAIKATO REGIONAL PLAN CHANGE 1



WAIKATO AND WAIPĀ RIVER CATCHMENTS

Submission form on publicly notified - Proposed Waikato Regional Plan Change 1 - Waikato and Waipā River Catchments.

Important: Save this PDF to your computer before answering. If you edit the original form from this webpage, your changes will not save. Please check or update your software to allow for editing. We recommend Acrobat Reader.

(a) adversely effects the environment, and

(b)

does not relate to the trade competition or the effects of trade competition.

SUBMISSIONS CAN BE

Mailed to

Delivered to

FORM 5 Clause 6 of First Schedule, Resource Management Act 1991

SubForm	PC12016	COVER SI	COVER SHEET		
	FOR OF	FICE USE ONLY			
		Submission Numb	er		
Entered		Initials			
File Ref		Sheet 1 of			

Faxed to	(07) 859 0998 Please Note: if you fax your submission, please post or deliver a copy to one of the above addresses		
Emailed to	healthyrivers@waikatoregion.govt.nz Please Note: Submissions received by email must contain full contact details.		
Online at	Online at www.waikatoregion.govt.nz/healthyrivers		
	We need to receive your submission by 5pm, 8 March 2017.		
YOUR NAME A	AND CONTACT DETAILS		
Email: Phone: ADDRESS FOR Full name: Address for serv	ICHMEL AITKEN HARPER WILLIAMS 145 WATREHT Rd. NEAROMA P.D.Y TE AWAMUT 8723603 Fax: SERVICE OF SUBMITTER vice of person making submission:		
	Fax:		
TRADE COMPE	TITION AND ADVERSE EFFECTS		
	could not gain an advantage in trade competition through this submission.		

Chief Executive, 401 Grey Street, Private Bag 3038, Waikato Mail Centre, Hamilton 3240

Waikato Regional Council, 401 Grey Street, Hamilton East, Hamilton

ADDITIONAL SHEET TO ASSIST IN MAKING A SUBMISSION

Section number of the Plan Change: SHEDULE "B" NITRUCEN REFERENCE POINT

Do you support or oppose the provision?

○ Support

Oppose

Submission

State in summary the nature of your submission and the reasons for it.

I AM OPPOSED TO THE LIMITING

OF THEN ITROGEN REPERENCE POINT,

FOR THAT LOULD LIMIT THE

POSSIBLE FUTURE OPTIONS

ADAILABLE TO THE CONTINUED

UIABILITY OF MY FARMING

OPPOSED

OPPOSED

TO, OR BE ELOWERD I WISH

TO, OR BE ELOWERD IN ORDER

TO REMAIN IN BYSINESS

AT ANY TIME IN THE

Decision Sought

State clearly the decision and/or suggested changes you want Council to make on the provision.

I FULLY MICEPT THAT

"SOMETHING MUST BE DONE

TO ENSURE THE CLEMNINE UP

OF OUR RIVERS.

BEARINE THAT EACH FARM

I FEEL THAT EACH FARM

SHOULD BE DEALT WITH ON AN

INDIVIDUAL BASIS. IE. THAT

EACH FARMER INVXVED, SHOULD SET

DOWN WITH LORG & INDIVIDUALLY

TAYLOK, A SOLYTION THAT SONS

SUITS BOTH PARTIES

Section number of the Plan Change: PULE

3.11, 5.7.

Do you support or oppose the provision?

Support

Oppose

Submission

State in summary the nature of your submission and the reasons for it. $\angle PP \wedge D \qquad \forall SE'' \qquad CHRNEE.$

SHOULD FUTURE LICHOMIC CONDITIONS DICTATE THAT MY CURRENT LAND USE AS BEICOMES NO LONGER CINBLE, THEN I MAY BE FORED TO CONSIDER A HITERATION LAND USE REGIME. A PINE TRIE PLANTITION, HOWELEK, WOULD NOT BE HE OPTION, HI I BELIEVE THAT PINE NEEDLE, ONCE THEY FALL INTO H WHICK WAY, BECOME TOXIC.

Decision Sought

State clearly the decision and/or suggested changes you want Council to make on the provision.

REAIN, I FELL THAT EACH FARM
OFFRATION, SHOULD BE DEALT
WITH ON HN INDIVIDUAL, FARM
BY FARM BASIS, ON THE
MERITS, OF LACK THEREOF
OF THE SITUATION
PERTAINIAG, INCEPTING
AGAIN, THAT SOMETHING
MUST BE DONE

THE SPECIFIC PROVISIONS OF PROPOSED PLAN CHANGE 1 THAT MY SUBMISSION RELATES TO

Please state the provision, map or page number e.g. Objective 4 or Rule 3.11.5.1 (Continue on separate sheet(s) if necessary). SHLOULF 「C.' らてどは じょしんりょうい

THE NATURE OF CONTOUR OF MY HILL (CUNTRY FARM),

IS OF A WERY BROKEN TYPE, WITH WATERWAYS PETALLINE

IN EXCESS OF 100 kms this would incolor immense

COST, PROHIBITING CONTINUED DIABILITY EXPECIALLY WHEN

CONSIDERINE THE DINCOINC COST DE CONTINUED MAINTAINENCE,

LARGE AREAS WOULD HAVE TO BE THEN BELOME AFRICA

TO GRAZING & WOULD SCON REVERT TO BLACKBERRY &

RACWORT / WEEDS ETC. SPRAYING WITH HERICIDES ETC

WOULD THEN BECOME NECCESSARY, ALL OF WHICH WOULD

IN TIME, FIND THEIR WAY INTO THE SAME WATERWAYS-BAD.

I SUPPORT OR OPPOSE THE ABOVE PROVISION/S

امکا	oct as	anne	nriate	and	continue	on se	narate	choot/s	ii f	necessary	١
(Sen	ru w	uppio	priute :	unu	conunue	OH SE	<i>vuiu</i> le	MERCIT	<i>y </i>	HECESSON A	,

- Support the above provisions
- O Support the above provision with amendments
- Oppose the above provisions

MY SUBMISSION IS THAT

Tell us the reasons why you support or oppose or wish to have the specific provisions amended. (Please continue on separate sheet(s) if necessary).

I AM OPPOSED TO THE "BLANKET TYPE" OF SOLUTION
THAT IS BEING OFFICED, DEKETOINE THAT NO TWO
FARMING OFFRATIONS ARE THE GAME, BUT PREFINE,
AT THE LAME TIME, THAT SOMETHING MUST BE DONE,
BEARING THAT IN MIND, I THEREFORE PROPOSE, THAT
EACH FARM IS DEALT WITH ON A FARM BY FARM
BASIS, AS I BEKETOE THAT "NO SIZE FITS ALL
USULD WELCOME THE OPPORTUNITY TO DO SO.

I SEEK THE FOLLOWING DECISION BY COUNCIL

(Select as appropriate and continue on separate sheet(s) if necessary).
Accept the above provision
O Accept the above provision with amendments as outlined
O Decline the above provision

ADDITIONAL SHEET TO ASSIST IN MAKING A SUBMISSION Section number of the Plan Change:

Do you	support	or oppose	: the p	rovision?

Support

⊙ Oppose

Submission

State in summary the nature of your submission and the reasons for it.

SHEDULE "C" & THE EXCLUSION,

TON TINUED

THE PROPOSAL TO EYCLUME

STOLL FROM WATERWAYS, WOULD

THUS REQUIRE THE FARM TO

IMPLEMENT AN ENTIRE WATER

RETICULATION SYSTEM WHICH

WOULD BE PROMISITIVE, ESPECIALLY

LUTIEN ONE FOR HUNDRED

ACRE ASPECT, IS ABOUT AS

IS POSSIBLE.

Decision Sought

State clearly the decision and/or suggested changes you want Council to make on the provision.

THIS SECTION, I HAVE DEALT WITH ON THE PREVIOUS PACE.

Section number of the Plan Change:

Do you support or oppose the provision?		A. W. Support & Oppose		
	Submission	Decision Sought		
	State in summary the nature of your submission and the reasons for it.	State clearly the decision and/or suggested changes you want Council to make on the provision.		

PLEASE INDICATE BY TICKING THE RELEVANT BOX WH SUBMISSION	ETHER YOU WISH TO BE HEARD IN SUPPORT OF YOUR
I wish to speak at the hearing in support of my submission	ons.
O I do not wish to speak at the hearing in support of my su	abmissions.
JOINT SUBMISSIONS	
O If others make a similar submission, please tick this box	if you will consider presenting a joint case with them at the hearing.
IF YOU HAVE USED EXTRA SHEETS FOR THIS SUBMISSI INDICATE BELOW	ION PLEASE ATTACH THEM TO THIS FORM AND
Yes, I have attached extra sheets.	No, I have not attached extra sheets.
SIGNATURE OF SUBMITTER	
Signature: A. Il Swalleams	Date: 11 1. 4.1.1
Personal information is used for the administration of the su will be held by Waikato Regional Council, with submitters ha	ubmission process and will be made public. All information collected aving the right to access and correct personal information.

PLEASE CHECK that you have provided all of the information requested and if you are having trouble filling out this form, phone Waikato Regional Council on 0800 800 401 for help.