



**Proposed Waikato District Plan  
Enabling Housing Supply Variation 3  
to the Proposed Waikato District Plan  
Submission form**

ECM Project: PDP2022V003-03
ECM # ..... <b>065</b> .....
Submission # .....
Customer # .....
Property # .....

RMA Form 5

**Closing date for submissions: 5pm on Friday 28 October 2022**

**Submitter details:** (please note that the (\*) are required fields and must be completed)

Name of submitter*:	
Contact person for communications*:	
Agent (if applicable):	
Postal address*:	
Suburb:	Town/City*:
Country:	Postal code*:
Daytime phone:	Mobile:
Email address for submitter*: Email address for agent (if applicable):	
Please tick your preferred method of contact* <input type="checkbox"/> Email <input type="checkbox"/> Postal	Correspondence to* <input type="checkbox"/> Submitter <input type="checkbox"/> Agent <input type="checkbox"/> Both
Trade competition and adverse effects:* <input type="checkbox"/> I could <input type="checkbox"/> I could not gain an advantage in trade competition through this submission.  Only if you ticked "I could" above, please answer this question: I am/am not directly affected by an effect of the subject matter of the submission that: (a) adversely affects the environment; and (b) does not relate to trade competition or the effects of trade competition.  <b>Note:</b> If you are a person who could gain an advantage in trade competition through the submission, your right to make a submission may be limited by clause 6(4) of Part I of Schedule I of the Resource Management Act 1991	
Would you like to present your submission in person at a hearing? <input type="checkbox"/> Yes <input type="checkbox"/> No  If others make a similar submission I will consider presenting a joint case with them at the hearing. <input type="checkbox"/> Yes <input type="checkbox"/> No	

Please complete a line for every submission point, adding as many additional lines as you need:

<p>The specific provisions of the proposal that my submission relates to e.g provision number, map or natural hazard area</p>	<p>Do you:</p> <ul style="list-style-type: none"> <li>• Support?</li> <li>• Oppose?</li> <li>• Amend?</li> </ul>	<p>What decision are you seeking from Council?</p> <p>What action would you like:</p> <ul style="list-style-type: none"> <li>• Retain?</li> <li>• Amend?</li> <li>• Add?</li> <li>• Delete?</li> </ul>	<p>Reasons</p>
<p>e.g. SUB-RI Subdivision - general</p>	<p>e.g Support</p>	<p>e.g Retain rule SUB-RI</p>	<p>e.g Subdivision should be allowed for .....</p>

Please return this form **no later than 5pm on Friday 28 October 2022** to:  
 Waikato District Council, 15 Galileo Street, Private Bag 544, Ngaruawahia 3742, or e-mail: [districtplan@waidc.govt.nz](mailto:districtplan@waidc.govt.nz)

Signed: ..... Date: .....  
 (A signature is not required if you make your submission by electronic means)

**PRIVACY ACT NOTE:** Please note that all information provided in your submission will be used to progress the process for this variation, and may be made publicly available.