

Proposed Waikato Regional Plan Change 1 – Waikato and Waipa River Catchments.

Submission form on publicly notified – Proposed Waikato Regional Plan Change 1 – Waikato and Waipa River Catchments.

SubForm	PC12016	COVER SHEET	
FOR OFFICE USE ONLY			
		Submission Number	
Entered		Initials	
File Ref		Sheet 1 of	

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

SUBMISSIONS CAN BE

Mailed to	Chief Executive, 401 Grey Street, Private Bag 3038, Waikato Mail Centre, Hamilton 3240
Delivered to	Waikato Regional Council, 401 Grey Street, Hamilton East, Hamilton
Faxed to	(07) 859 0998 <i>Please Note: if you fax your submission, please post or deliver a copy to one of the above addresses</i>
Emailed to	healthyrivers@waikatoregion.govt.nz <i>Please Note: Submissions received my email must contain full contact details. We also request you send us a signed original by post or courier.</i>
Online at	www.waikatoregion.govt.nz/healthyrivers

We need to receive your submission by 5pm, 8 March 2017.

YOUR NAME AND CONTACT DETAILS

Full name: Dr Lindsay Matthews		
Full address: 31 Rosebanks Drive, RD3 Hamilton 3283		
Email lindsay.matthews1@gmail.com	Phone 022 422 1510	Fax

ADDRESS FOR SERVICE OF SUBMITTER

Full name Dr Lindsay Matthews		
Address for service of person making submission: 31 Rosebanks Drive, RD3 Hamilton 3283		
Email lindsay.matthews1@gmail.com	Phone 022 422 1510	Fax

TRADE COMPETITION AND ADVERSE EFFECTS *(select appropriate)*

<input checked="" type="checkbox"/> I could not gain an advantage in trade competition through this submission.
<input type="checkbox"/> I am / <input type="checkbox"/> am not directly affected by an effect of the subject matter of the submission that: (a) adversely effects the environment, and (b) does not relate to the trade competition or the effects of trade competition. Delete entire paragraph if you could not gain an advantage in trade competition through this submission.

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.)*

3.11.5.1 Permitted Activity Rule - Small and low intensity farming activities

I SUPPORT OR OPPOSE THE ABOVE PROVISION/S

(select as appropriate and continue on separate sheet(s) if necessary.)

- Support the above provisions
- 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 oppose the lower limit property area (greater than 2 ha) for low intensity grazing. The lower limit to which the rule applies must be 4.1 ha.

Reason: Any potential adverse impacts of low intensity grazing are so small as to NOT warrant the proposed reporting, etc requirements of the rule.

I SEEK THE FOLLOWING DECISION BY COUNCIL

(select as appropriate and continue on separate sheet(s) if necessary.)

- Accept the above provision
- Accept the above provision with amendments as outlined below
- Decline the above provision
- If not declined, then amend the above provision as outlined below

Amend as follows:

The lower limit to which the rule applies must be 4.1 ha.

PLEASE INDICATE BY TICKING THE RELEVANT BOX WHETHER YOU WISH TO BE HEARD IN SUPPORT OF YOUR SUBMISSION

I wish to speak at the hearing in support of my submissions.

I do not wish to speak at the hearing in support of my submissions.

JOINT SUBMISSIONS

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 SUBMISSION PLEASE ATTACH THEM TO THIS FORM AND INDICATE BELOW

Yes, I have attached extra sheets.

No, I have not attached extra sheets.

SIGNATURE OF SUBMITTER

(or person authorised to sign on behalf of submitter)

A signature is not required if you make your submission by electronic means.

Signature

Date 8 March 2017

Personal information is used for the administration of the submission process and will be made public. All information collected will be held by Waikato Regional Council, with submitters having 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.

Additional sheet to assist in making a submission

Section number of the Plan Change	Support /Oppose	Submission	Decision sought
Please refer to title and page numbers used in the plan change document	Indicate whether you support or oppose the provision.	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.