Form 5 Submission on publicly notified proposal for policy statement or plan

Clause 6 of First Schedule, Resource Management Act 1991

Masterton, Carterton and South Wairarapa District Councils To C/- Masterton District Council PO Box 444 Masterton

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Name of submitter:	
Full name:	
Postal Address for Service	
Telephone:	
Fax/email:	
Contact person: [name and designation, if applicable]	
This is a submission on the Propose	ed Wairarapa Combined District Plan:
The specific provisions of the Propare:	oosed Wairarapa Combined District Plan that my submission relates to
[give details].	
My submission is: [include –	are the specific provisions or wish to have them amonded, and
whether you support or opporeasons for your views].	se the specific provisions or wish to have them amended; and
- reasons for your views].	

^{**}Please note all sections of the following form need to be completed**

(cont.)
I seek the following decision from the local authority:
[give precise details].
I wish to be heard in support of my submission.
Yes No [circle one]
If others make a similar submission, I will consider presenting a joint case with them at a hearing. Yes No [circle one]
Signature of submitter (or person authorised to sign on behalf of submitter)
Date
(A signature is not required if you make your submission by electronic means.)