## FORM 5

## SUBMISSION ON A PUBLICLY NOTIFIED PLAN CHANGE/ VARIATION

## CLAUSE 6 OF FIRST SCHEDULE RESOURCE MANAGEMENT ACT 1991

To:	Mackenzie PO Box 52	e District Council
	FAIRLIE 7	
Full name	of submitter:	·
Address f	or service:	
Telephon	e:	
Fax/email	:	
Contact p	erson:	
		(name and designation, if applicable)
-	ould not (dele	e District Plan ete one) gain an advantage in trade competition through this
The speci <i>(give detai</i>	-	of the proposal that my submission relates to are:

My submission is:	
(include whether you support or oppose the specific provisions or wish to he amended and the reasons for your views)	nave them
amended and the reasons for your views)	
I seek the following decision from the Mackenzie District Council:	
(give precise details)	

☐ I wish to be heard in support of my submission
☐ <b>I do not wish to be heard</b> in support of my submission (tick one box)
If others make a similar submission I <b>would / would not</b> (delete one) be prepared to consider presenting a joint case with them at any hearing.
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.)

If you have any queries about this form or the proposed plan change or variation, please contact Nathan Hole, Planning and Regulations Manager, Mackenzie District Council.