

WITHIN SCOPE **APPLICATION**



PLEASE COMPLETE ALL MANDATORY FIELDS* OF THIS FORM.

This form provides contact information and details of your application. If your form does not provide the required information it will be returned to you to complete. Until we receive a completed form your application may not be accepted for processing.



APPLICANT //

*Email:

- Must be a person or legal entity (limited liability company or trust).
- Full names of all trustees required.

• The a	pplicant name(s) will be the consent holde		
*Applicant's Full Name / Company / Tru Name Decision is to be issued in)	ust:		
All trustee names (if applicable):			
*Contact name for company or trust:			
Postal Address:			*Post code:
*Contact details supplied must be for the <u>applica</u>	ant and not for an agent acting on their bel	<u>alf</u> and must include a valid postal add	dress
Email Address:			
Phone Numbers: Day		Mobile:	
The Applicant is:			
Owner	Prospective Pu	rchaser (of the site to which the app	lication relates)
Occupier	Lessee	Other - Please Specify:	
	Correspondence Details by email	unless requested otherwise.	chitect please fill in your details in this
The decision will be sent to the CORRESPONDENCE DETAINMENT WITH A COMPANY:	Correspondence Details by email	unless requested otherwise. applicant e.g. agent, consultant or arc	chitect please fill in your details in this
The decision will be sent to the CORRESPONDENCE DETAIL	Correspondence Details by email	unless requested otherwise.	chitect please fill in your details in this
The decision will be sent to the CORRESPONDENCE DETAINMENT WITH A COMPANY:	Correspondence Details by email	unless requested otherwise. applicant e.g. agent, consultant or arc	chitect please fill in your details in this
The decision will be sent to the CORRESPONDENCE DETAINMENT OF THE SENTENCE OF	Correspondence Details by email	unless requested otherwise. applicant e.g. agent, consultant or arc	chitect please fill in your details in this
*Name & Company: *Phone Numbers: Day *Email Address:	Correspondence Details by email	unless requested otherwise. applicant e.g. agent, consultant or arc	
*Name & Company: *Phone Numbers: Day *Email Address: *Postal Address:	Correspondence Details by email LS // If you are acting on behalf of the	unless requested otherwise. e applicant e.g. agent, consultant or arc Mobile:	
*Name & Company: *Phone Numbers: Day *Email Address: *Postal Address:	Correspondence Details by email LS // If you are acting on behalf of the	unless requested otherwise. applicant e.g. agent, consultant or arc Mobile: the applicant's behalf. f this form.	
*Name & Company: *Phone Numbers: Day *Email Address: *Postal Address: NVOICING DETAILS // proices will be made out to the applicant but our more information regarding payment please.	Correspondence Details by email LS // If you are acting on behalf of the	unless requested otherwise. applicant e.g. agent, consultant or arc Mobile: the applicant's behalf. f this form.	
*Name & Company: *Phone Numbers: Day *Email Address: *Postal Address: *Postal Address: *Postal Address: *Postal Address:	Correspondence Details by email LS // If you are acting on behalf of the can be sent to another party if paying or se refer to the Fees Information section of eive any invoices and how they would like	unless requested otherwise. applicant e.g. agent, consultant or arc Mobile: the applicant's behalf. f this form. e to receive them.	
*Name & Company: *Phone Numbers: Day *Email Address: *Postal Address: *Postal Address: *Postal Address: Applicant:	Correspondence Details by email LS // If you are acting on behalf of the can be sent to another party if paying or se refer to the Fees Information section of eive any invoices and how they would like Agent:	unless requested otherwise. applicant e.g. agent, consultant or arc Mobile: the applicant's behalf. f this form. e to receive them.	
*Name & Company: *Phone Numbers: Day *Email Address: *Postal Address: *Noices will be made out to the applicant but or more information regarding payment pleas Please select a preference for who should rece Applicant: Email:	Correspondence Details by email LS // If you are acting on behalf of the can be sent to another party if paying or se refer to the Fees Information section of eive any invoices and how they would like Agent:	unless requested otherwise. applicant e.g. agent, consultant or arc Mobile: the applicant's behalf. f this form. e to receive them.	

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OWNER DETAILS // Please supply owner details for the subject site/property if not already indicated above

Owner Address:	
Owner Email:	
If the property has recently changed ownership please	ndicate on what date (approximately) AND the names of the previous owners:
Date:	
Names:	
DETAILS OF SITE	
Address / Location which this applicatio	n relates
radicss / Location which this applicatio	Treduces
Legal Description: Can be found on the C	Computer Freehold Register – e.g Lot x DPxxx
Legal Description. Can be found on the	computer recention negister - e.g Lot x Dr xxx
RESOURCE CONSENT REFERENCE	
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Resource Consent:	Date of Issue:
Resource Consent: BREIF DESCRIPTION OF PROPOSAL	Date of Issue:
	Date of Issue:



PRIVACY INFORMATION

The information you have provided on this form is required so that your application can be processed under the Resource Management Act 1991 and may also be used in statistics collected and provided to the Ministry for the Environment and Queenstown Lakes District Council. The information will be stored on a public register and may be made available to the public on request or on the company's or the Council's websites.



FEES INFORMATION

Section 36 of the Resource Management Act 1991 deals with administrative charges and allows a local authority to levy charges that relate to, but are not limited to, carrying out its functions in relation to receiving, processing and granting of resource consents (including certificates of compliance and existing use certificates).

Invoiced sums are payable by the 20th of the month after the work was undertaken. If unpaid, the processing of an application, provision of a service, or performance of a function will be suspended until the sum is paid. Payment is due on the 20th of the month or prior to the issue date – whichever is earlier.

A list of Consent Charges is available on the on the Resource Consent Application Forms section of the QLDC website. If you are unsure of the amount to pay, please call 03 441 0499 and ask to speak to our duty planner.

LIABILITY FOR PAYMENT – Please note that by signing and lodging this application form you are acknowledging that the details in the invoicing section are responsible for payment of invoices and in addition will be liable to pay all costs and expenses of debt recovery and/or legal costs incurred by QLDC related to the enforcement of any debt.

Please ensure to reference any banking payments correctly. Incorrectly referenced payments may cause delays to the processing of your application whilst payment is identified.



APPLICATION & DECLARATION

The Council relies on the information contained in this application being complete and accurate. The Applicant must take all reasonable steps to ensure that it is complete and accurate and accepts responsibility for information in this application being so.

If lodging this application as the Applicant:

I/we hereby represent and warrant that I am/we are aware of all of my/our obligations arising under this application including, in particular but without limitation, my/our obligation to pay all fees and administrative charges (including debt recovery and legal expenses) payable under this application as referred to within the Fees Information section.

OR: If lodging this application as agent of the Applicant:

I/we hereby represent and warrant that I am/we are authorised to act as agent of the Applicant in respect of the completion and lodging of this application and that the Applicant / Agent whose details are in the invoicing section is aware of all of his/her/its obligations arising under this application including, in particular but without limitation, his/her/its obligation to pay all fees and administrative charges (including debt recovery and legal expenses) payable under this application as referred to within the Fees Information section.

Signed (by or as authorised agent of the Applicant):**				
Full name of person lodging this form:				
Firm / Company:	Dated:			

**If this form is being completed on-line you will not be able, or required, to sign this form and the on-line lodgement will be treated as confirmation of your acknowledgement and acceptance of the above responsibilities and liabilities and that you have made the above representations, warranties and certification.



