

APPLICATION FOR PERMITTED BOUNDARY ACTIVITY

Under s87BA of the Resource Management Act 1991



Office Use Only

Application No.

Date Received

Time

Applicant Details

Name

Postal Address

Home Phone

Cell Phone

Email

Agent Details (if different to that of the applicant)

Name

Postal Address

Phone

Client Reference

Email

Location of Activity

NB: A full site plan (to scale) is required as part of this application.

Street Address

Legal Description

Valuation Number

Written Consent of Affected Parties

Gained and Attached

Certificate of Title

CT Attached Council to provide CT (MDC & CDC \$20 inc GST/ SWDC \$25 inc GST)

Signature/s

To be signed by the applicant or agent

Name

Date