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| http://intranet.ccc.govt.nz/Documents/CCClogobw.jpg | **FURTHER SUBMISSION IN SUPPORT OF OR OPPOSITION TO A SUBMISSION RECEIVED ON A PLAN CHANGE TO THE  CHRISTCHURCH DISTRICT PLAN**  Clause 8 of Schedule 1, Resource Management Act 1991 | Office use only **F-Submission No.** |

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| **Submissions can be:** | | | |
| **Posted to:** | City Planning Team  Christchurch City Council  PO Box 73012  Christchurch 8154 | **Delivered to:** | Ground floor reception  53 Hereford Street  Christchurch  Attn: City Planning Team |
| **Emailed to:** | [PlanChange@ccc.govt.nz](mailto:PlanChange@ccc.govt.nz) | | |

*\* Denotes required information*

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| **This is a further submission on:** |
| Plan Change Number:\* Plan Change number. |

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| **Your name and contact details:** | |
| Full name of person **or** organisation making further submission:\*  Name or organisation. | |
| Address for service:\*  Address for service. | |
| Email:  Email. | Phone:\*  Phone number. |

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| **Person of interest declaration\*** |
| I am *(state whether you are):* |
| Explain the grounds for saying you come within category (a) or (b) above:  Grounds for saying you come within category. |

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| **Note to person making further submission** |
| ***A further submission can only support or oppose an original submission listed in the summary. It is not an opportunity to make a fresh submission on matters not raised in the submissions.***  ***A copy of your further submission must be served on the original submitter within 5 working days of making the further submission to the Council.*** |

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| **I support / oppose *(choose one)* the submission of:\*** |
| *(Please insert the name and address of the original submitter, and submission number of the original submission. If you are making a further submission on multiple submitters, please use the* ***table form*** *on the last page and make sure it is attached.)*  I support/oppose the submission of. |

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| **The particular parts of the submission that I support / oppose *(choose one)* are:\*** |
| *(You should clearly indicate which parts of the original submission you support or oppose* ***(state S and D number as shown in the summary of submission)****, together with the relevant provision of the proposed Plan Change.)*  The particular parts of the submission that I support/oppose are. |

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| **The reasons for my support (or opposition) are:\*** *(Please give precise details)* |
| The reasons for my support/opposition are. |

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| **I seek that the whole or part of the submission be allowed / disallowed:\*** *(Please specify the relevant parts)* |
| I seek the whole or part of the submission be allowed/disallowed. |

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| **Please indicate by ticking the relevant box whether you wish to be heard in support of your further submission.\*** |
| I wish to /  I do not wish to speak at the hearing in support of my further submission. |

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| **Joint submissions** *(Please tick this box if you agree)* |
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| **If you have used extra sheets for this submission, please attached them to this form and indicate this below\*** | |
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| **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: Date. |
| **Submissions are public information**  The information requested in this submission, including your contact details is required by the Resource Management Act 1991. A copy of your submission will be made available for inspection at all Council service centres and libraries in accordance with the requirements of the Act. A document summarising all submissions and including names and addresses of submitters will be posted on the Council’s website.  If you consider there are compelling reasons why your contact details should be kept confidential, you should contact the Statutory Administration Adviser at 941 8999. | |

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| **Submitter Name and Address for service\*** | **Submission No.** | **Decision No.** | **Support or Oppose\*** | **Reasons for support / opposition\*** *(Please give precise details)* | **Decision sought (I seek the whole or part of the submission to be allowed / disallowed)\*** *(Please specify the relevant parts)* |
| **Example:** John Doe, 21 Jump Street, Papanui, Christchurch 8051 | S10 | D1 – D5 | Support | I support this submission because… | I seek the whole submission to be allowed. |
| Submitter name. | Sub. No. | Dec. No. | Support or oppose. | Reasons. | Reasons. |
| Submitter name. | Sub. No. | Dec. No. | Support or oppose. | Reasons. | Reasons. |
| Submitter name. | Sub. No. | Dec. No. | Support or oppose. | Reasons. | Reasons. |
| Submitter name. | Sub. No. | Dec. No. | Support or oppose. | Reasons. | Reasons. |
| Submitter name. | Sub. No. | Dec. No. | Support or oppose. | Reasons. | Reasons. |
| Submitter name. | Sub. No. | Dec. No. | Support or oppose. | Reasons. | Reasons. |
| Submitter name. | Sub. No. | Dec. No. | Support or oppose. | Reasons. | Reasons. |
| Submitter name. | Sub. No. | Dec. No. | Support or oppose. | Reasons. | Reasons. |
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| Submitter name. | Sub. No. | Dec. No. | Support or oppose. | Reasons. | Reasons. |