

Transfer of a Resource Consent

Section 134-137 Resource Management Act 1991

| | | |
|---|---|--|
| PART A | Consent Details | |
| Consent number | | |
| Transfer of: | Whole Resource Consent <input type="checkbox"/> | Part Resource Consent <input type="checkbox"/> |
| If this is a partial transfer, please clearly describe which part of the consent is being transferred: | | |
| | | |
| | | |
| Site Address | | |
| | | |
| Legal Description | | |
| | | |
| Approximate date consent first used: | | |
| Note: If your resource consent has lapsed, it cannot be transferred. Contact Customer Services if you require any clarification. | | |
| How consent was first used: | | |
| Description of activity authorised by consent | | |
| Is the consent currently under review | YES / NO (please delete where applicable) | |
| Please attach a copy of the Title Search. Where a Title Search is not supplied and is required for processing of the transfer, Southland District Council may obtain a copy, and the cost of this may be charged to you. | | |
| Lodgement and processing fee is \$500.00 and must be received with the application in order for processing to begin. Any additional staff time taken to process the consent will be charged based on staff hourly rates as set out in Council's Fees and Charges. | | |
| Please tick payment method: | | |
| <input type="checkbox"/> Cash | <input type="checkbox"/> Eftpos | |
| <input type="checkbox"/> SDC Website – Pay It function (only available to existing debtor account holders) | | |
| Please state debtor number paid to: | | |
| <input type="checkbox"/> Paid via internet banking Southland District Council Acc. No: 02 0924 0064987 000 | | |
| From: (account name) | On: (Date) | |
| IF PAYING BY INTERNET BANKING, PLEASE USE THE APPLICANT'S NAME AS A REFERENCE AND THE WORDS "RESOURCE CONSENT" IN THE CODE AND/OR PARTICULARS FIELDS: EG: J B CITIZEN - RESOURCE CONSENT | | |

[PLEASE REFER TO LATEST APPROVED SCHEDULE OF FEES AND CHARGES]

PART B Current Consent Holder Details

| | | |
|---------|------------------------------|----------------|
| Surname | All first names (in full) | Mr/Mrs/Ms/Miss |
| Surname | All first names (in full) | Mr/Mrs/Ms/Miss |

Company Name

Current postal address

| | |
|-------------------------|------------|
| Telephone Number (work) | Fax number |
|-------------------------|------------|

| | |
|-------------------------|------------|
| Telephone Number (home) | Fax number |
|-------------------------|------------|

| | |
|------------------|-------|
| Cellphone number | Email |
|------------------|-------|

| | | | | |
|---|------|--|--|--|
| Signature/s of current consent holder/s (or duly authorised agent on behalf of the consent holder) | Date | | | |
|---|------|--|--|--|

Print Name(s)

Please note that a request to transfer a resource consent cannot occur without signatures of all current consent holders.

PART C New Consent Holder Details

Full legal name

Full legal name

Registered Company Name and number

Current postal address

Telephone Number (work)

Telephone Number (home)

| | |
|---------------|-------|
| Mobile number | Email |
|---------------|-------|

If this consent is currently under review, as indicated in Part A, I understand the conditions of the consent may change after the transfer has occurred.

| | | | | |
|---|------|--|--|--|
| Signature/s of current consent holder/s (or duly authorised agent on behalf of the consent holder) | Date | | | |
|---|------|--|--|--|

Print Name(s)

Please note that a request to transfer a resource consent cannot occur without signatures of all current consent holders.

- Note:
1. Until a complete transfer form is received, new documents cannot be processed.
 2. Any compliance monitoring charges for work completed up until the date of transfer will be invoiced to the transferor.
 3. The transfer will be effective from the date Council receives the complete transfer form.

If a resource consent requires a partial change of name:
- Part B must contain all names of current consent holders; and

- Part C must contain all names of proposed new consent holders INCLUDING the individual or organisation intending to remain a resource consent holder.

Notice of Material Extracted

Post Email or fax this completed page when requested by Council

This must be completed by the current owner before the transfer can take place

Email: sdcsouthlanddc.govt.nz

The Compliance Officer
Resource Consents
Southland District Council
PO Box 903
Invercargill 9840

| | |
|---------------------------|--|
| Application number | |
| Site address(es) | |
| Proposal | |

| | |
|------------------------------|--------|
| Volume extracted (m3) | Site 1 |
| | Site 2 |
| | Site 3 |
| | Site 4 |

| | | | |
|--|--|------|--|
| <p>Extracted between: / / and (date): / /</p> | | | |
| Owner/Contractor signature | | Date | |

NB: Please complete this form even if no extraction has occurred within this timeframe.