Deemed Permitted Boundary Activity Application Form

Section 87BA of the Resource Management Act 1991 (RMA). This form provides us with your contact information and details about your proposal. Please print clearly and complete all sections.

**Note to applicant:**

You must include all information required by this form. If all information is not included, the consent authority will return this to you and the correct information must be supplied before a written notice confirming your activity is a permitted boundary activity can be provided.

In order to be eligible for a deemed permitted boundary activity, the activity must meet the definition of a ‘boundary activity’ under Section 87AAB(1) of the RMA.

You must provide written approval from all owners of allotments with infringed boundaries under Section 87BA(1) of the RMA.

If all of the information required under Section 87BA(1) of the RMA is provided to the consent authority, the consent authority must notify you of your permitted boundary activity within 10 working days after the date on which it receives the information.

You must pay the charge (if any) payable to the Council for the deemed permitted boundary activity under the RMA.

If signing on behalf of a trust or company, please provide written evidence that you have signing authority.

**Please note that if you are lodging this application with a building consent application you must separate the two documents to avoid a delay in the processing of your applications.**

**Please print clearly and complete all sections.**

**To:** Name of Council who is the consent authority for this application: Select a Council

**Applicant Name**

Please provide the full name of the persons, company, society or trust applying for this resource consent. If the applicant is a trust, please provide the full name/s of all trustees of that trust.

|  |  |
| --- | --- |
| Name: |  |

**Applicant Contact Details**

|  |  |
| --- | --- |
| Postal Address: |  |
|  |  |  |  |
| Post code: |  |  Email: |  |
|  |  |  |  |
| Phone: |  |  Mobile: |  |

**Agent Contact Details**

If you have an agent or other person acting on your behalf, please complete the details below.

|  |  |
| --- | --- |
| Agent: |  |
|  |  |
| Contact: |  |
|  |  |
| Postal Address: |  |
|  |  |  |  |
| Post code: |  |  Email: |  |
|  |  |  |  |
| Phone: |  |  Mobile: |  |

**Location of Proposal**

Please complete with as much detail as you can, so the site for your proposal is clearly identifiable. Include details such as unit number, street name and town.

Property address:

|  |
| --- |
|  |

Legal description:

|  |
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**Description of Proposal**

Please provide a brief description of your boundary activity and address the district plan rules relevant to your proposal. This includes but is not limited to bulk and location rules. If the space provided is insufficient, please attach additional pages.

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**Site plan**

Attach plans (drawn to scale) of the site at which the activity is to occur, showing the height, shape, and location of the site of the proposed boundary activity.

**Other owners**

The full name and address of each owner (other than the applicant) of the site that the proposed activity relates to are as follows: (list full names and addresses):

|  |
| --- |
|  |

**Building Consent**

Is this application for a deemed permitted boundary activity being lodged at the same time as a building consent?

[ ]  Yes

[ ]  No

|  |  |
| --- | --- |
| Please enter the reference number of the building consent *(if known)* |  |

**Site Visit Requirements**

[ ]  As owner and with the consent of any occupiers or lessee, I am aware that Council staff or authorised consultants may visit the site which is the subject of this application, for the purposes of assessing this application, and agree to a site visit.

OR

[ ]  If the applicant is not the owner, I understand that Council staff or authorised consultants may visit the site, which is the subject of this application, for the purposes of assessing this application, and agree to a site visit.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Is there a locked gate or security system restricting access by Council staff? | [ ]  Yes |  | [ ]  No |  |
|  |  |  |  |  |
| Are there any dogs on the property? | [ ]  Yes |  | [ ]  No |  |
|  |  |  |  |  |
| Are there any hazards that may place a visitor at risk? | [ ]  Yes |  | [ ]  No |  |

Provide details of any entry restrictions that Council staff should be aware of e.g. health and safety, organic farm etc.

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| --- |
|  |

**Infringed boundaries**

The full name and address of each owner of an allotment with an infringed boundary to which the proposed activity relates are as follows *(list full names and addresses)*:

|  |
| --- |
|  |

[ ]  I have attached written approval and a signed site plan and elevations from each owner of an allotment with an infringed boundary (refer to Form 8B written approval).

**Signature of the applicant(s)**

Please read before signing the application form.

**Payment of fees and charges**

You must pay the charges payable to Council for this application under the RMA. Please refer to Council’s Fees and Charges on its website.

By submitting this application to Council, you agree to pay the charges set out in Council’s Fees and Charges relevant to the application.

**Privacy information**

Council requires the information you have provided on this form to process your application under the RMA. Council will hold and store the information on a public register. The details may also be made available to the public on the Council’s website. If you would like to request access to, or correction of any details, please contact the Council.

**Information checklist**

The information checklist below sets out the full set of information that Council requires for your application to be considered complete. Your application may be returned as incomplete if you do not provide adequate information. Your completed application should be submitted to Council with any supplementary forms and/or guidance as provided by Council.

**Declaration of the applicant**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Applicant name: |  | Signature: |  | Date: |  |
|  |  |  |  |  |  |
| Applicant name: |  | Signature: |  | Date |  |
|  |  |  |  |  |  |
| Applicant name: |  | Signature: |  | Date |  |

**Information Checklist for Deemed Permitted Boundary Application**

[ ]  Completed written approval forms of affected person and **signed site plan(s)**.

These **must be included**.

[ ]  Record of title(s) for the subject site.

This must be less than 3 months old. Please attach the title(s) and any consent notices, covenants, easements attached to the title(s).

[ ]  A plan (drawn to scale) of the site at which the activity is to occur, showing the height, shape and location on the site of the proposed permitted boundary activity.

[ ]  A plan (drawn to scale) showing the location of the building or activity in relation to all site boundaries.