

FOR OFFICE USE ONLY

CON120: APPLICATION FOR A CERTIFICATE OF COMPLIANCE

(Under Section 139 of the Resource Management Act)

If you need help in filling out this form please contact our Customer Services staff on (03) 353-9007 or toll free 0800 EC INFO (0800 324 636). They will be able to provide some general assistance.

Send the completed application to: *Environment Canterbury, 58 Kilmore Street, P O Box 345, Christchurch 8140.*

Receipt number:

Charges paid:

CRC:

Definition

A Certificate of Compliance is a certificate issued by a local authority that a particular proposal or activity is a permitted activity in terms of a plan or can be lawfully carried out without a resource consent in respect of any particular location.

Charges

Your application must be accompanied with the deposit charge specified in the "Summary of Resource Consent Charges" or at www.ecan.govt.nz. When your application has been processed, if the actual and reasonable costs incurred by Environment Canterbury exceed the deposit charge, you will be invoiced for the balance. If the cost of processing an application is less than the deposit charge paid, the balance will be refunded. You can require the provision of an estimate of the charge for processing your application. If an application is declined all charges must still be paid.

All accounts are payable by the 20th day of the month following the date of invoice. If the account is not paid within 30 days after the due date, our debt collection agent may charge you a fee equal to 25% of the unpaid portion of the account, but no less than \$25.00. Where the total debt collection costs, legal and other costs arising from the collection of any amount owing exceeds the debt collection fee charged, our debt collection agent is also entitled to recover such additional costs. All Environment Canterbury charges must be met by the applicant. This may include time spent discussing issues with the applicant and any other parties involved in the process.

Part A: Application Details

1. Name and address of applicant(s):

Surname: _____ First names (in full): _____ Mr/Mrs/Ms/ Miss/Dr/Prof.

Surname: _____ First names (in full): _____ Mr/Mrs/Ms/ Miss/Dr/Prof.

OR

Registered Company name and number: _____

Postal address: _____

Postcode: _____

Phone (home): _____ Phone (business): _____

Fax (home): _____ Fax (business): _____

Email: _____ Cellphone: _____

Contact person: _____

You must declare by ticking this box if you are an ECan staff member, an ECan Councillor, or a family member of either.

2. Consultant/Agents details (if applicable):

Contact person: _____

Company: _____

Postal address: _____

Postcode: _____

Email: _____

Phone: _____ Fax: _____

During the processing of your application who will be the contact person for making decisions? Applicant Consultant / Agent
Note: All correspondence during the consent investigation process will be directed to this contact person, unless instructed otherwise. Final decision documents will be sent to the applicant.

Who will be the contact person for compliance monitoring matters? Applicant Consultant / Agent

3. Names and addresses of the owner and occupier of the site to which this application relates.

(You only need to include this information if it is different to that of the applicant(s))

Owner: _____ Phone: _____

Postal address: _____

Postcode: _____ Fax: _____

Occupier: _____ Phone: _____

Postal address: _____

Postcode: _____ Fax: _____

4. The location of the site to which this application relates:

Site address: _____

Locality: _____

Legal description: _____

Map reference: _____

The legal description can be found on the certificate of title, valuation notice, subdivision plan or rate demand for the site. Please include a copy of one of these with your application.

5. Under which District Council or City Council is this site located?

- | | | | |
|--|---------------------------------------|---|-------------------------------------|
| <input type="checkbox"/> Ashburton DC | <input type="checkbox"/> Kaikoura DC | <input type="checkbox"/> Timaru DC | <input type="checkbox"/> Waitaki DC |
| <input type="checkbox"/> Christchurch CC | <input type="checkbox"/> Mackenzie DC | <input type="checkbox"/> Waimakariri DC | |
| <input type="checkbox"/> Hurunui DC | <input type="checkbox"/> Selwyn DC | <input type="checkbox"/> Waimate DC | |

Have you consulted with the appropriate District or City Council to determine whether you need a consent from them for this activity?

Yes No

If yes, what was their response? _____

If a consent is required, have you applied for it? Yes No

PART D: SIGNATURE AND DATE

I have read all of the information on this application form and I understand that I am liable to pay all actual and reasonable charges relating to the processing of this application.

I also understand that if the application is granted, I will be liable to pay all actual and reasonable charges related to compliance monitoring of that consent.

Signature of consultant

Date

Full name of person signing – please print

Signature of applicant

Date

Full name of person signing – please print

*****Note:** Both the consultant (if used) and the applicant/s must sign this section.

CHECKLIST

Have you remembered to?

- Complete all the details set out in Part A of this application form.
- Include a site plan, clearly showing where the activity will occur and any relevant engineering design plans if applicable.
- Include a copy of the certificate of title, rates demand, subdivision plan or valuation notice for the site your application relates to.
- Sign and date this application form.
- Include the appropriate deposit charge as set out in the “Summary of Resource Consent charges”.