

To:
Chief Executive
Taranaki Regional Council
Private Bag 713
Stratford



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Withdrawal of request to be heard or Withdrawal of submission

Submitter's name _____

Submitter's address _____

hereby withdraws the request to be heard; or

hereby withdraws the submission

made upon the application for a consent by

applicant's name _____ application number[s] _____

activity _____

The reason for withdrawal is:

acceptance of the draft conditions to be attached to the consent (if granted)

other _____

Signed _____ Date _____

Notes i) *If you no longer wish to be heard in support of your submission, but still wish the Councillors to take it into account when deciding the application, tick the first box (withdrawal of request to be heard). You would then still retain your right to appeal any decision made by the Council.*

ii) *If you no longer wish the Councillors to consider your submission when deciding the application, tick the second box (withdrawal of submission). However, this means that you lose the right to appeal any decision made by the Council.*

**If you have any queries, please contact the Consents Section
of the Taranaki Regional Council.**

For Office use only

Database updated by _____ Date _____