**Form 6**

**Further Submission in Support of, or in Opposition to, Submission on Publicly Notified Private Plan Change**

*Clause 8 of Schedule 1, Resource Management Act 1991*

To: Masterton District Council, PO Box 444, Masterton, ATTN: Planning

planningadmin@mstn.govt.nz

Name of Person Making Further Submission: [*full name*]

This is a further submission in support of (*or* in opposition to) a submission on the following proposed change to the Operative Wairarapa Combined District Plan.

Welhom Developments Limited Private Plan Change to the Operative Wairarapa Combined District Plan (2011)

*[name of proposed plan change]*

I am

*[state whether you are –*

* *A person representing a relevant aspect of the public interest. In this case, also specify the ground for saying that you come within this category; or*
* *A person who has an interest in the proposal that is greater than the interest the general public has. In this case also explain the grounds for saying that you come within this category; or*
* *The local authority for the relevant area.]*

I support (*or* oppose) the submission of

*[name and address of original submitter and submission number of original submission if available]*

The particular parts of the submission I support (*or* oppose) are

*[Clearly indicate which parts of the original submission you support or oppose together with any relevant provisions of the proposal]*

*[continue on separate sheet(s) if necessary]*

The reasons for my support (*or* opposition) are:

[*give reasons*]

*[continue on separate sheet(s) if necessary]*

I seek that the whole (*or* part [*describe part*]) of the submission be allowed (*or* disallowed):

[*Give precise details.*]

*[continue on separate sheet(s) if necessary]*

I wish (*or* do not wish) to be heard in support of my further submission.

*[please delete one option]*

\*If others make a similar submission, I will consider presenting a joint case with them at a hearing.

*\*Delete if you would not consider presenting a joint case*

Signature of person making further submission

(*or* person authorised to sign on behalf of person making further submission*.*)

Date:

(*A signature is not required if you make your submission by electronic means*)

Electronic address for service of person making further submission:

Telephone number:

Postal address (*or* alternative method of service under section 352 of the Act):

Contact Person: *[name and designation, if applicable]*

**Note to person making further submission**

A copy of your further submission must be served on the original submitter within 5 working days after making the further submission to the local authority.