Doc No: IT-2044 (1 June 2005)

FORM 13

SUBMISSION ON A PUBLICLY OR LIMITED NOTIFIED APPLICATION CONCERNING RESOURCE CONSENT

Section 96 Resource Management Act 1991
(Rotorua Lakes Council is the operating name of Rotorua District Council)

ROTORUA LAKES COUNCIL

To:
Chief Executive
Rotorua Lakes Council
Private Bag RO3029
ROTORUA

Name of Submitter:
Katie Brickell
[Full Name]

Received
25 JUN 2025
Rotorua Lakes Council
Customer Centre

This is a submission on an application from *[name of applicant]*:
Tikanga Aroro Charitable trust

for a Resource Consent to *[Briefly describe the type of consent, proposed activity, and location of the resource consent]*:
Establish & operate a reintegration facility for ~~ex~~ prisoners in the rural zone

at *[The location of the resource consent]*:
473 Puaiti Road

The specific parts of the application that my submission relates to are *[Give Details]*:
All parts of the application

My submission is *[include whether you **support or oppose** the specific parts of the application or wish to have them amended; and the reasons for your views]*:
I oppose this facility for the following reasons; I am a mother to a young child who is often home alone during the day & evening. I have no neighbour in sight & limited service at home. If the facility where to go ahead I would feel my situation opportunistic & would feel vulnerable. I know of many other mums to young children in the area in the same situation. To call the police for help would take time even with lights & sirens to reach the community/my house. I am also a shift worker & out late on the rural roads, Although the facility itself is "drug & alcohol free" the prisoners would have free will to do this outside of the facility in our community. I am a health professional & have worked with clients of similar backgrounds. Services is key for successful rehabilitation, there are no services out here it is an isolated area which would effect rehabilitation & in turn cause harm in the community. Also no housing post rehabilitation here

I seek the following decision from the consent authority *[Give precise details, including the general nature of any conditions sought]*:
To decline the application in its entirity

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☑ I wish to be heard in support of my submission

☐ I do not wish to be heard in support of my submission

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

Signature of submitter *(or* person authorised to sign on behalf of submitter): 	Date: 23/7/25
Address for service of Submitter: [redacted]	Telephone: [redacted]
Contact person: *[name and designation, if applicable]*	Fax/email:

Note to submitter:

You must serve a copy of your submission on the applicant as soon as reasonably practicable after you have served your submission on the consent authority.

The information you have provided on this form is required so that your submission can be processed under the RMA, and your name and address will be publicly available. The information will be stored on a public register and held by the Council, and may also be made available to the public on the Council's website. In addition, any on-going communications between you and Council will be held at Council's offices and may also be accessed upon request by a third party. Access to this information is administered in accordance with the Local Government Official Information and Meetings Act 1987 and the Privacy Act 1993. If you have any concerns about this, please discuss with a Council Planner prior to lodging your submission. If you would like to request access to, or correction of your details, please contact the Council.

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