

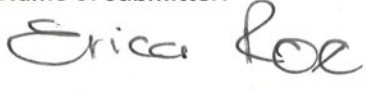
FORM 13

SUBMISSION ON A PUBLICLY OR LIMITED NOTIFIED  
APPLICATION CONCERNING RESOURCE CONSENT

ROTORUA  
LAKES COUNCIL

Section 96 Resource Management Act 1991

(Rotorua Lakes Council is the operating name of Rotorua District Council)

<b>To:</b> Chief Executive Rotorua Lakes Council Private Bag RO3029 ROTORUA	<b>Name of Submitter:</b>  [Full Name] <b>Received</b> 25 JUN 2025
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This is a submission on an application from [name of applicant]:

Rotorua Lakes Council  
Customer Centre

Tikanga Charitable Trust

for a Resource Consent to [Briefly describe the type of consent, proposed activity, and location of the resource consent]:

To establish & operate housing activity in the  
Rural 2 zone (A of the Rotorua Lakes District Plan

at [The location of the resource consent]:

473 Puaiti Road, Waikite Valley

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

The application in its entirety

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

I seek the following decision from the consent authority [Give precise details, including the general nature of any conditions sought]:

Decline application  
When I moved to this area my main reasons  
were for safety & the rural character.

I live with my husband, when he is not  
there I feel safe but my safety will  
be compromised if this consent is given

To defend myself I could use reasonable  
force but I am a 72 yr old lady what  
chance would I have against one of  
men from the reintegration facility.

Since moving here in 2015 I have planted  
a blue berry orchard, selling pick your own.  
Having the facility in the valley will not enhance  
customers in both regards of a zoning change  
& safety.

☒





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: 23.6.25
Address for service of Submitter: 	Telephone: 
Contact person: [name and designation, if applicable] Erica Roe	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.