Doc No: IT-2044 (1 June 2005)

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)

То:	Name of Submitter:
Chief Executive	Debbie Deadman
Rotorua Lakes Council	Control Americans And Street Control C
Private Bag RO3029	
ROTORUA	[Full Name]

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]:

To establish and operate a reintegration housing activity in the rural zone 1A of the Rotorua Lakes District Plan.

at [The location of the resource consent]:

473 Puaiti Road, Waikite Valley, 3077

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 this application for a proposed establishment of an intensive rehabilitation facility. While I share all the concerns of the community I have grave concerns for my family who live on the boundary of this proposed facility. The safety concerns are enormous, this area is full of families with young children and it would be placing these families in danger. While the programme reports a 85% success rate, anything less than 100% is not worth the risk. This area is remote and it would take up to an hour for police/emergency services to arrive. The safety risks are too high. Surely a facility of this nature should be close to community services?

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

To decline the application.

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:
Alle.	25-Jun-2025
Address for service of Submitter:	Telephone:
Contact person: [name and designation, if applicable] Debbie Dead Man.	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.