Submissions form on publicly notified Proposed District Plan Change 77
Curtis Street Business Area
FORM 5 Clause 6 of First Schedule, Resource Management Act 1991

SUBMISSIONS CAN BE

| Posted to          | District Plan Team  
|                   | Wellington City Council  
|                   | PO Box 2199  
|                   | Wellington 6011  

| Delivered to      | Ground floor reception  
|                   | Civic Square/101 Wakefield Street  
|                   | Wellington  

| Faxed to          | 801 3165  
| (if you fax your submission, please post or deliver a copy to one of the above addresses)  
| Please use additional sheets if necessary.  

| Emailed to        | district.plan@wcc.govt.nz  

We need to receive your submission by 5pm, Monday 11 March 2013.

YOUR NAME AND CONTACT DETAILS

Full name Naomi Lane  
Full address 13 Cooper St. Karori. WGN  
Address for service of person making submission as above  
Email nlane@ymail.com  
Phone 9731313  
Fax

TRADE COMPETITION AND ADVERSE EFFECTS (select appropriate)

☒ I could / ☐ could not gain an advantage in trade competition through this submission.

Delete entire paragraph if you could not gain an advantage in trade competition through this submission.

THE SPECIFIC PROVISIONS OF PROPOSED DISTRICT PLAN CHANGE 77 THAT MY SUBMISSION RELATES TO ARE AS FOLLOWS (Please continue on separate sheet(s) if necessary.)

The entire Plan Change ie the whole area be rezoned as ‘Curtis Street Business Area
**MY SUBMISSION IS THAT**
(You should include whether you support or oppose the specific provisions or wish to have them amended. You should also state the reasons for your views. Please continue on separate sheet(s) if necessary.)

I support the proposed submission to rezone the area because:
1. It would be a good use of the site as it is not suitable for residential development due to the high tension power lines and limited sun light.
2. There aren’t many large parcels of land in Wellington for business development.
3. The area is not very densely populated therefore development would not have too greater impact.

**WE SEEK THE FOLLOWING DECISION FROM THE COUNCIL** *(Please give precise details.)*
To approve the plan change.

**PLEASE INDICATE BY TICKING THE RELEVANT BOX WHETHER YOU WISH TO BE HEARD IN SUPPORT OF YOUR SUBMISSION**

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<th>I wish to speak at the hearing in support of my submissions.</th>
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<td>I do not wish to speak at the hearing in support of my submissions.</td>
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**JOINT SUBMISSIONS**

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**IF YOU HAVE USED EXTRA SHEETS FOR THIS SUBMISSION PLEASE ATTACH THEM TO THIS FORM AND INDICATE BELOW**

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**SIGNATURE OF SUBMITTER**
(or person authorised to sign on behalf of submitter)
*A signature is not required if you make your submission by electronic means.*

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Personal information is used for the administration of the submission process and will be made public. All information collected will be held by Wellington City Council, with submitters having the right to access and correct personal information.

If you are having trouble filling out this form, phone the District Plan Team on 499 4444 for help.