

Taupō-nui-ā-Tia Management Board

DRAFT MANAGEMENT PLAN FOR TAUPŌ WATERS SUBMISSION FORM

The following form is to be used to provide submissions on the Draft Management Plan for Taupō Waters.

Notes to Submitter:

Please download and complete this form and return to jdelange@doc.govt.nz. You may also mail your submission to: J de Lange, c/- Department of Conservation, PO Box 528, Taupō 3158 or drop completed submission into Taupō Office, 37 Motutaiko Street, Taupō.

Closing Date:

The closing date for serving submissions to the Taupō-nui-ā-Tia Management Board on this matter is **1 October 2020**.

Privacy:

We will deal with any personal information you supply in your submission in accordance with the Privacy Act 1993. We will only use your contact details for the purposes of processing, considering and deciding on submissions as they relate to the Draft Management Plan for Taupō Waters (or in exceptional circumstances for other reasons permitted under the Privacy Act 1993).

You should be aware that your submission will be made publicly available on the Taupō-nui-ā-Tia Management Board web page on the Department of Conservation website (www.doc.govt.nz).

Once submitted, submitters' information is subject to the Official Information Act 1982 and may be released under that Act. Your contact details will be removed only if you have indicated this as your preference in the tick box on page one.

Under the Privacy Act 1993, you may request the right of access to, and correction of, personal information provided in this submission.

Do not send this page of this document with your submission. If you require additional space for providing your submission, please attach extra pages as needed and label according to the relevant section.

1. Submitter Information

Name:	
Organisation (if applicable):	
Role (if applicable):	
Email:	
Phone:	
Address:	

I wish to keep my contact details confidential

2. Statement of Support/Opposition

For this application I/We

Support

Neutral

Oppose

3. Hearing Request

I/We wish to be heard in support of this submission at a hearing (please tick one).

Yes

No

4. Submission

The specific parts of the application that this submission relates to are:

What outcomes would you like to address with your submission? [give precise details, including the parts of the application you wish to have amended and the general nature of any conditions sought]:

5. Your Signature

Signature of submitter or person authorised to sign on behalf of submitter:

Printed name of submitter or person authorised to sign on behalf of submitter

Date

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