

Please return this form to: info@adc.govt.nz or Ashburton District Council, PO Box 94, Ashburton 7740

Submitter Details

Name:

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Consent Application

Name of applicant:

Delwyn Walker

Application number:

LUC25/0012

I/We support this application

☐

I/We oppose this application

☒

The reasons for making my submissions are (please state the nature of your submission and give reasons):

Please refer to my letter dated 1st July 2025 for full rationale in declining support of this planning request. I have re-attached this to this email.
Namely: Loss of neighbourhood character, increased traffic + safety risk, greater noise + disruption, cumulative negative impact and a departure from the intended residential zone purpose.

I wish the consent authority to make the following decision (please give details, including the general nature of any conditions sought):

I wish the council to decline this consent in order to maintain the integrity of the current residential zoning.

I wish to be heard in support of my submission

☒

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

☐

Signature and Date 9.10.2025

Signature:



Note: The person making this application must send a copy to the applicant as soon as reasonably practicable