

Resource Consents Unit

Submission on an Application for **Resource Consent**

Resource Management Act 1991 - Form 13

Email your submission to: resourceconsentapplications@ccc.govt.nz; or Deliver to: Resource Consents Unit, Christchurch City Council, 53 Hereford Street, Christchurch; or

Send to: Resource Consents Unit, Christchurch City Council, PO Box 73013, Christchurch Mail Centre, Christchurch 8154.

For enquiries phone, 02 044 9000

For enquiries priorie. 03 941 6999	
1. Submitter Details	Application Reference:
	RMA: 2020/702
Name of Submitter (state full name):	Planner: Matthew Klomp
Street Address:	Post Code:
Postal Address (if different):	Post Code:
Email Address:	
Contact phone number (daytime):	
My address for service for receiving documents and communication about this applicatio	n is:
By email	
☐ By post	
2. Application details	
Application Reference Number (if not stated above): RMA/2020/702	
Name of Applicant (state full name): Lumo Digital Limited	
Application Site Address: 399 Lincoln Road	
Description of Proposed Activity: To establish two digital screen billboards, each corner of the site, generally facing east and west.	29.2m² in size, located in the eastern
corner or the site, generally lasting east and west.	
3. Submission details	
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I / we: Support all or part of the application	
Oppose all or part of the application	
Am neutral towards the application	
The specific parts of the application that my/our submission relates to are: (give details,	using additional pages if required.)

The reasons for my/our submission are: (use additional pages if required.)
The decision I/we would like the Council to make is: (give details including, if relevant, the parts of the application you wish to have amended and the general nature of any conditions sought. Use additional pages if required.)
4. Hearing of this application
If a hearing is held I / we:
Wish to speak in support of my / our submission Do not wish to speak in support of my / our submission
Do not wish to speak in support of my / our submission If others make a similar submission I / we will consider presenting a joint case with them at the hearing
Please note that only those submitters who indicate that they wish to speak at the hearing will be sent a copy of the planning report.
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5. Signature (Of submitter(s) or person authorised to sign on behalf of submitter(s))
Signature: Date:
Signature: Date:
Note: A signature is not required if you make your submission by electronic means
6. Important information

- 1. The Council must receive your submission before the closing date and time for submissions on this application.
- 2. You must also send a copy of this submission to the applicant as soon as reasonably practicable, at the applicant's address for service.
- 3. If you change your mind about whether you wish to speak at the hearing, please contact the Council by telephone on 941 8999 or by email at resourceconsentapplications@ccc.govt.nz.

7. Privacy information

The information requested on this form, including your contact details, is required by the Resource Management Act 1991. The information will be held by the Council, and you may ask to check and correct any personal information that we hold about you. Your submission, including your name and contact details, will be made available to the decision-maker and other parties involved in the application. It may also be made available on the Council's website.

If requested, the Council is legally required to make all submissions available to the public (which can include the media), including the name and contact details of the submitter, subject to the provisions of the Local Government Official Information and Meetings Act 1987. If you believe there are compelling reasons why your contact details should be kept confidential please contact the Processing Planner for this application.

For Office Use Only			
Received at the	Office on	at ar	n / pm