

CON540: TRANSFER OF A RESOURCE CONSENT

SECTIONS 134-137 RESOURCE MANAGEMENT ACT 1991

TO: Resource Management Section
Southland District Council
PO Box 903
Invercargill 9840

Ph: 0800 732 732 Fax: 0800 732 329

FOR OFFICE USE ONLY

PART A: Consent Details

Consent number: _____

Transfer of: Whole Resource Consent Part Resource Consent

If this is a partial transfer, please clearly describe which part of the consent is being transferred:

Site address: _____

Legal description: _____

Approximate date consent first used: _____

Note: If your resource consent has lapsed, it cannot be transferred. Contact Customer Services if you require any clarification.

How consent was first used: _____

Description of activity authorised by consent: _____

Is the consent currently under review: YES / NO (please delete where applicable)

Please attach a copy of the Title Search. Where a Title Search is not supplied and is required for processing of the transfer, Southland District Council may obtain a copy, and the cost of this may be charged to you.

RESOURCE CONSENT

PART B: Current Consent Holder Details *

Surname: _____ All first names (in full): _____ Mr/Mrs/Ms/Miss

Surname: _____ All first names (in full): _____ Mr/Mrs/Ms/Miss

Company name: _____

Current postal address: _____

Telephone number (work): _____ Fax Number: _____

Telephone number (home): _____ Fax Number: _____

Cellphone number _____ Email: _____

Date: / /

Signature/s of **current consent holder/s**
(or duly authorised agent on behalf of the consent holder)

Print name/s

Please note that a request to transfer a resource consent cannot occur without signatures of all current consent holders.

PART C: New Consent Holder Details *

Surname: _____ All first names (in full): _____ Mr/Mrs/Ms/Miss

Surname: _____ All first names (in full): _____ Mr/Mrs/Ms/Miss

Registered Company name and number: _____

Current postal address: _____

Telephone number (work): _____ Fax Number: _____

Telephone number (home): _____ Fax Number: _____

Cellphone number _____ Email: _____

Date: / /

Signature/s of **new consent holder/s**
(or duly authorised agent on behalf of the consent holder)

Print name/s

Please note that a request to transfer a resource consent cannot occur without signatures of all new consent holders.

- Note:
1. Until a complete transfer form is received, new documents cannot be processed.
 2. Any compliance monitoring charges for work completed up until the date of transfer will be invoiced to the transferor.
 3. The transfer will be effective from the date Council receives the complete transfer form.

- If a resource consent requires a partial change of name:
 - Part B must contain all names of current consent holders; and
 - Part C must contain all names of proposed new consent holders INCLUDING the individual or organisation intending to remain a resource consent holder.