

TRANSFER FORM



Caring for Northland and its Environment

Notice of Transfer of a Resource Consent

In Accordance with Sections 134, 135, 136 or 137 of the Resource Management Act 1991

To: The Secretary
Northland Regional Council
Private Bag 9021
Whangarei Mail Centre
Whangarei 0148

Whangarei Office

Phone: (09) 438 4639

Fax: (09) 438 0012

Kaitaia Office

Phone: (09) 408 6600

Opuia Office

Phone: (09) 402 7516

Dargaville Office

Phone: (09) 439 3300

Free Phone

0800 002 004

www.nrc.govt.nz

email: mailroom@nrc.govt.nz

Transfer of a Resource Consent from:

PART I

**Existing Consent
Number to be
Transferred**

(please ensure that all
consent numbers and
subtypes are listed)

Type of Consent:

**Full Name of Existing
Consent Holder(s),
Registered Company
or Trust:**

(in full eg. Albert Williams
Jones and Mary Anne
Jones)

Address:

(as shown on the Consent
Document)

Declaration of EXISTING Consent Holder(s)

As described above, the Consent Holders interest in the consent is hereby transferred, subject to the provisions of the Resource Management Act and any relevant Consent Condition.

**Signature of
Consent Holder(s):**

(or person authorised to
sign on behalf of the
Consent Holder(s))

Date:

Important Notes for Consent Holders and Transferees:

Transfer Fee: \$49.50 (payable before transfer of the Resource Consent is registered)

If the Resource Consent is held by a number of parties, written approval from all of the parties who jointly hold the consent is required.

A transfer is not complete until the transfer fee is paid and all Consent Holders (if more than one person) have signed this transfer notice. Until such time as the transfer is complete, the existing Consent Holder(s) remain fully responsible for all conditions and obligations of the Consent, including payment of all due charges.

Most Resource Consents attract annual resource user charges based on monitoring and administration of the activity.

Transfer Resource Consent to the following NEW Consent Holder:

PART II

Full Name of NEW Consent Holder(s), Registered Company or Trust: _____

 (in full eg. Alan Ray Smith and Sue Anne Smith)

Postal Address: _____
 (in full)
Residential Address: _____
 (if different, in full)

Phone Number: (Home)	Mobile:
Phone Number: (Business)	Fax Number:

Declaration of NEW Consent Holder

I/We have read and understood the notes on page one of this form. I/We acknowledge that the Resource Consent is to be transferred as described on this form and will comply with all conditions of the Resource Consent and accept liability for all charges associated with the Resource Consent from the date of transfer.

Signature of New Consent Holder(s):
 (or person authorised to sign on behalf of the Consent Holder(s))

Date:

PART III For Company, Trust or other organisations only (to also be completed if relevant)

Personal Details and Signatures of Trustees, or Officers Authorised to Sign on Behalf of, and to Bind Trusts, Societies and Unincorporated Entities:*
 * Private and family trusts only

Full Name & Status:
 (Trustee, Officer etc) _____

Full Residential Address: _____

Signature: _____

Full Name & Status:
 (Trustee, Officer etc) _____

Full Residential Address: _____

Signature: _____

Office Use Only: Any additional monitoring or outstanding fees to be invoiced? Yes No

PART III Continuation Sheet

Personal Details and Signatures of Trustees, or Officers Authorised to Sign on Behalf of, and to Bind Trusts, Societies and Unincorporated Entities:*

** Private and family trusts only*

Full Name & Status:

(Trustee, Officer etc)

Full Residential Address:

Signature:

Full Name & Status:

(Trustee, Officer etc)

Full Residential Address:

Signature:

Full Name & Status:

(Trustee, Officer etc)

Full Residential Address:

Signature:

Full Name & Status:

(Trustee, Officer etc)

Full Residential Address:

Signature: