



**APPENDIX P**

Written Approval – 33 Campbell Street

# Get written approval from affected persons

Absolutely Positively  
**Wellington City Council**  
Me Heke Ki Pōneke

Under Section 95E, Resource Management Act 1991

## Notes for the applicant

Use this form to record approval of anyone affected by your resource consent application.

If you have any questions, visit [Wellington.govt.nz/resourceconsents](http://Wellington.govt.nz/resourceconsents), email [planning@wcc.govt.nz](mailto:planning@wcc.govt.nz) or phone us on 04 801 3590

## Applicant details

Full name: Ryman Healthcare Limited

Address of proposed activity: 26 Donald Street and 37 Campbell Street, Karori, Wellington

Brief description of proposed activity:  
(eg new house or garage, earthworks) Construction, operation and maintenance of a comprehensive care retirement vi

## Affected persons (please print)

Full name/s: Healthcare Shelf Company No. 28 Limited - Ryman Healthcare Limited

Address of affected property:  
33 Campbell Street, Karori, Wellington

Electronic address for service: [david.bennett@rymanhealthcare.com](mailto:david.bennett@rymanhealthcare.com)  
Postal address:  
c/o Rymanhealth, PO Box 771, Christchurch 8140

I am/we are the OWNER(S)/OCCUPIER(S) of the property.

I have authority to sign on behalf of all the other OWNERS/OCCUPIERS of the property.

In most cases the Council will require the approval of the legal owners and the occupiers of the affected property.

You should only sign below if you support or have no opposition to approval of the application for resource consent you have been asked to consider.

- 1 I/We have been given details of the full and final proposal, including a copy of the application form, assessment of the environmental effects and plans, and plans to which I/we are giving approval.
- 2 I/We agree that we have signed the resource consent application and each page of the plans shown to us relating to this application.
- 3 I/We understand that by giving my/our written approval, the Council cannot take account of any actual or potential effects of the activity on my/our property when considering the application. The fact that any such effects may occur shall not be relevant grounds on which the Council may refuse to grant its consent to the application.
- 4 Further, I/we understand that at any time before the application is finalised, I/we may give notice in writing to the Council that this approval is withdrawn, under S104(4) of the Resource Management Act 1991.
- 5 If the consent authority determines that the activity is a deemed permitted boundary activity under section 87BA of the Act, your written approval cannot be withdrawn if this process is followed instead.

Signature(s) of all property owners (or person authorised to sign on behalf of person giving written approval)

Date 24-03-2020

Date

\* A signature is not required if you give your written approval by electronic means.

## Privacy information

The information you have provided on this form is required so that your application can be processed under the Resource Management Act 1991, and so that statistics can be collected by Wellington City Council. The information will be stored on a public register and held by Wellington City Council.

Under the Privacy Act 1993, you have the right to see and correct personal information Wellington City Council holds about you.

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