

Resource Consents Unit

Notice of permitted plantation forestry activity

This form is used to provide written notice to undertake permitted plantation forestry activities as defined in Regulation 3 of the **Resource Management (National Environmental Standards for Plantation Forestry) Regulations 2017**.

Please email to: resourceconsentapplications@ccc.govt.nz

Location

Name of forest:

Property address:

Legal description:

Details of the activity

This notice is for: Afforestation Harvesting Forestry quarrying

Planned start date: Planned end date:

Note: This notice must be submitted at least 20 working days and no more than 60 working days before the date the activity is planned to begin, or, in the case of harvesting for salvage operations, at least 2 days before such harvesting is planned to begin.

Is any clearance of indigenous vegetation proposed? (refer Regulation 93) Yes No

Please attach the following information as required by the NES-PF:

Afforestation

- Map of area to be planted (Regulation 10)
- Wilding tree risk calculation sheet and score (Regulation 11)
- Proposed setbacks, including a description of how they were calculated (Regulations 12-14)

Harvesting

- Map of area to be harvested (Regulation 63)

Forestry quarrying

- Map of area where quarrying is to be carried out (Regulation 52)
- Proposed setbacks, including a description of how they were calculated (Regulation 52)

Please note:

- For the activity to be permitted it must comply with all applicable permitted activity conditions in the NES-PF, including those relating to ancillary indigenous and non-indigenous vegetation clearance and the general provisions relating to noise, vibration, dust and indigenous bird nesting.
- The Council may charge for the monitoring of forestry quarrying in accordance with Regulation 106(c) and the [Resource Management Fee Schedule](#).

Person giving notice

Full name:	<input type="text"/>
Name of company:	<input type="text"/>
Telephone:	<input type="text"/>
Email:	<input type="text"/>
Postal Address:	<input type="text"/>

Forestry Consultant / Agent details (if applicable)

Name:	<input type="text"/>
Name of firm:	<input type="text"/>
Telephone:	<input type="text"/>
Email:	<input type="text"/>
Postal Address:	<input type="text"/>

Declaration

I / We acknowledge that the permitted activity is to be held in my / our name as described above.

I / We understand that the information submitted is required to be kept available for public record, therefore the public (including business organisations, media and other units of the Council) may view this application, once submitted. It may also be made available to the public on the Council's website. If there is commercially sensitive information in your application please let us know. If you would like to request access to, or correction of, your details, please contact the Council.

Signature of person providing notice of the permitted activity (or person authorised to sign on their behalf):

Name:	<input type="text"/>	Date:	<input type="text"/>
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