

Application for Permit to Extract Gravel

Applicant's Details:

Permit No.: _____

Name of Applicant: _____

Address for Service: _____

Name of Contact Person: _____

Telephone: Business: _____ Home: _____ Mobile: _____

Email: _____

Site and Location Details:

Name of river (separate application required for each site): _____

Location of extraction point: **(Plan and Map Reference required)** E: _____ N: _____ (NZTM)

Supply Photos for Marlborough Sounds sites only:

Enclosed? Yes No

Extraction from Council's stockpile? Yes No

Period for which permit is required (one year max): _____

Quantity to be extracted: _____ Cubic metres

Site access where not Council floodway land:

Name of riverbed site owner: _____ Approved by Owner Yes No

Landowners providing access to site: _____ Approved Yes No

Declaration:

I _____ acting as agent for the applicant, declare that the information given above is accurate. I acknowledge the requirement to carry out gravel extraction in accordance with the conditions of the Marlborough Environment Plan and further special conditions, as appropriate to the site location, at a fee determined by Council.

Signature: _____ Date: _____

Once you have completed this entry form, please save it to your computer for your records, then email a copy of the saved document to mdc@marlborough.govt.nz.

Office Use Only:

River Code: _____ Site Code: _____ Site distance: _____ (km) E: _____ N: _____

1. MEP: _____ 2. Owner RC _____ 3. MDC RC _____ 4. Stockpile Sales (Extract Permit No. _____)

Screening is/is not permitted

(for stockpile permits only) Fee: \$ /m3 (GST incl) Special Conditions (see over)

Record No. 15131250