

Application for Permit to Extract Gravel



**MARLBOROUGH
DISTRICT COUNCIL**

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.

For 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)

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