**Resource consent number:**

Resource consent is no longer required and I/we request that the application be withdrawn.

Application name:

Address of application property:

Reasons for withdrawing:

Contact name:

Phone number:       Email:

Address:

[ ]  I/we have authorisation to sign for all parties

Signature Date:

(a) Authority to sign:

 [ ]  Owner

 [ ]  Manager

 [ ]  Director

 [ ]  Secretary

[ ] Other *(specify)*:

**Email this signed form to** **RegulatoryAdmin@boprc.govt.nz****.**

(b) This consent application will be withdrawn once the applicant receives an acceptance notice from Bay of Plenty Regional Council.