**Resource consent number:**

This form is to surrender the above resource consent, either in whole  or part

Description of which part *(if surrendering in part)*:

Name of consent holder:

Address of consented property:

Consent purpose:

Reasons for surrendering this consent:

I/we have authorisation to sign for all parties.

Signature Date:

(a) Authority to sign:

Owner

Manager

Director

Secretary

Other *(specify)*:

(b) Surrender of this consent will take effect once the consent holder receives a notice of acceptance from Bay of Plenty Regional Council (section 138(4) of the RMA).

Phone *(select preferred contact number)*

Residential        Business

Cell

Email

**Send the signed form to** [**RegulatoryAdmin@boprc.govt.nz**](mailto:RegulatoryAdmin@boprc.govt.nz)**.**

**Fees and Charges**

Any Fees and Charges related to the consent will be reviewed at time of Surrender as per General matters of the Charges Policy: <https://www.boprc.govt.nz/your-council/plans-and-policies/policies/resource-management-act-and-building-charges-policy/>.

There is no fee to process the Surrender.