|  |
| --- |
| For Office use only |
| Pre-Lapse Date | *Click or tap to enter a date.* |
| Receipt Number | *Click or tap here to enter text.* |
| Charges Paid | *Click or tap here to enter text.* |
| CRC | *Click or tap here to enter text.* |

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**CON551**

**PARTIAL SURRENDER OF**

**RESOURCE CONSENT**

SECTIONS 138 RESOURCE MANAGEMENT ACT 1991

*If you need help in filling out this form, please contact our Customer Services staff on
(03) 353-9007 or toll free 0800 EC INFO (0800 324 636).*

*We will be able to provide some general assistance.*

*How to apply*

*Email the completed application and supporting documentation to:* ecinfo@ecan.govt.nz *Or send to Environment Canterbury, PO Box 345, Christchurch 8140*

* If you are wanting to partially transfer a resource consent please use the form;
	+ - [CON541B](https://www.ecan.govt.nz/document/download?uri=4137650): Partial Transfer of a discharge consent or;
		- [CON541C](https://www.ecan.govt.nz/document/download?uri=4137654): Partial Transfer of a Resource Consent (excluding Ground/Surface Water Take & discharge).
* Your application must be accompanied with the fixed fee specified [here](https://www.ecan.govt.nz/do-it-online/resource-consents/understanding-consents/consent-costs/) on Environment Canterbury’s website page
“How much will my consent cost?”
* Any compliance monitoring charges for work completed up until the date of transfer will be invoiced to the current consent holder.

**Note:** ***If your resource consent has conditions specifically requiring a water meter to be installed, partially surrendering the rate of take will not remove the requirement of a water meter***

| **PART A: Consent details** |
| --- |
| **I/We**,Consent holder |
| **Surname** | *Click or tap here to enter text.* | **All first names (in full)** | *Click or tap here to enter text.* | **Title** | *Click or tap here to enter text.* |
| **Surname**  | *Click or tap here to enter text.* | **All first names (in full)** | *Click or tap here to enter text.* | **Title** | *Click or tap here to enter text.* |
| **Postal address:** | *Click or tap here to enter text.* | **Postcode** | *Click or tap here to enter text.* |
| **OR** |
| **Registered Company name and number**  | *Click or tap here to enter text.* |
| **OR other legal entity with an NZBN number** | *Click or tap here to enter text.* |
| **Full Postal address** | *Click or tap here to enter text.* |
| **Telephone number (work)** | *Click or tap here to enter text.* | **Mobile number** | *Click or tap here to enter text.* |
| **Telephone number (home)** | *Click or tap here to enter text.* | **Email**  | *Click or tap here to enter text.* |
| **Address for service** | [ ]  **Email above** | [ ]  **Postal address above** | **Other address or email** (please specify) | *Click or tap here to enter text.* |
| **I/We wish to partially surrender resource consent number** | *Click or tap here to enter text.* |
| **authorising the following activity**  | *Click or tap here to enter text.* |
| **Please clearly describe which part of the consent or bore/SWAP you wish to surrender** | *Click or tap here to enter text.* |
| **Because** *(state why you wish to part surrender this consent/bore/SWAP):* | *Click or tap here to enter text.* |

| IF YOUR CONSENT IS TO TAKE GROUND OR SURFACE WATER, COMPLETE THIS SECTION. |
| --- |
| **Site address** | *Click or tap here to enter text.* |
| **Legal description** | *Click or tap here to enter text.* |
| **Bore/surface water abstraction point number(s)** | *Click or tap here to enter text.* |
| **Map reference(s):** | *Click or tap here to enter text.* |

| **How much water is to be surrendered? (Please complete the table below)** |
| --- |
|  | **Proposed water to be surrendered** | **Proposed water to be retained** |
|  | **Bore** | **Bore** | **Bore** | **Bore** |
| Maximum pumping rate (l/s) | *Click or tap here to enter text.* | *Click or tap here to enter text.* | *Click or tap here to enter text.* | *Click or tap here to enter text.* |
| Hours per day pumping at maximum rate | *Click or tap here to enter text.* | *Click or tap here to enter text.* | *Click or tap here to enter text.* | *Click or tap here to enter text.* |
| Daily volume (m3) (rate x hours x 3.6) | *Click or tap here to enter text.* | *Click or tap here to enter text.* |
| Length of irrigation return period (days) | *Click or tap here to enter text.* | *Click or tap here to enter text.* |
| Volume (m3) each return period | *Click or tap here to enter text.* | *Click or tap here to enter text.* |
| Annual volume | *Click or tap here to enter text.* | *Click or tap here to enter text.* |
| **If you are partially surrendering or retaining water from more than two bores, please attach an additional table** |

| **ALL TO COMPLETE** |
| --- |

I request that the Council accept surrender of the Resource Consent under Section 138(4) of the Resource Management Act 1991. I understand that the authorised activity must cease with immediate effect (not applicable if activity is now permitted); if I wish to restart this activity I will need to submit a new application (not applicable if activity is now permitted).

|  |
| --- |
| **I confirm there are no reasons known to me why I am not in a lawful position to surrender this consent.**  |
| [ ]  **Liquidation** | [ ]  **Receivership** | [ ]  **Property sale** | *(please select correct option)* |
| If you have sold your property, you may wish to apply for a transfer of consent. CON 540 forms are available from Customer Services or on our website [here](https://www.ecan.govt.nz/do-it-online/resource-consents/process/lodge-my-application/) |
| Signature/s of **all** consent holders (note: if this consent is in the name of a company and/or limited partnership only 1 director’s signature is required). | **Shape  Description automatically generated with low confidence** | **Date** | *Click or tap to enter a date.* |
| **Name/s of signatories** | *Click or tap here to enter text.* |
| **If you are signing on behalf of the consent holder and you are:*** **not a director of the company that is the consent holder; or**
* **not a director of the general partner of the limited partnership that is the consent holder; or**
* **If you represent a territorial authority, body corporate, or incorporated society; please complete the following declaration** (Please ensure all fields are completed):
 |
| **I am** | [ ]  **an employee** | [ ]  **officer** | [ ]  **member** | **of the consent holder** *(please select correct option)* |
| **I** | *Click or tap here to enter text.* | **Full name, occupation, employer of authorised signatory** |
| **am authorised by**  | *Click or tap here to enter full name of Consent Holder* |
| **the consent holder** | *Click or tap here to enter text.* | **to sign this partial surrender dated** | **Date** | *Click or tap to enter a date.* |
| **Signature of authorised signatory** | Shape  Description automatically generated with low confidence | **Date** | *Click or tap to enter a date.* |
| **Name/s of signatory** | *Click or tap here to enter text.* |

**Terms of Trade**

On accepting this transfer please note that the monitoring and administration charges will apply and Environment Canterbury’s Terms of Trade are that all accounts be paid by the 20th of the following month. Should the account remain unpaid within 30 days after the due date, Environment Canterbury reserves the right to refer the account onto a collection agency and any costs incurred in doing this will be passed onto you as the account holder.

| **Please complete to confirm inclusion of the following:** |
| --- |
| [ ]  | Part A completed, signed by all appropriate parties, and dated.  |
| [ ]  | Proof of Payment included |
| Method of payment | *Click or tap here to enter text.* | **Date:** | *Click or tap to enter a date.* | Proof attached [ ]  |
| [ ]  | Copy of the Record of Title/s for the land parcels this consent relates to.  |
| [ ]  | Proof of occupancy (e.g., lease agreement or title confirming registered lease) if you are not the Landowner. |
| [ ]  | Copy of maps relating to partial water Transfers / Surrenders as applicable. |
| [ ]  | Please provide death certificate and name of executor if the consent holder is deceased. |