



## BULLER DISTRICT COUNCIL

Westport Area  
Buller District Council  
PO Box 21  
WESTPORT 7866  
Phone (03) 788 9111  
Fax (03) 788 8041

Reefton Area  
Buller District Council  
PO Box 75  
REEFTON 7851  
Phone (03) 732 8821  
Fax (03) 732 8822

### RESOURCE CONSENT APPLICATION FOR SIGN

1. Read form thoroughly.
2. Provide all relevant details.
3. Provide a deposit of \$350.00.  
**Please note that this is a deposit only and Council operates on a full cost recovery system. Therefore if the cost of processing the consent is more than the deposit, you will be charged the additional amount. Upon payment of any additional amount, you will receive the consent.**
4. Contact Planning staff if you need help or advice.

**NOTE:** DO NOT ERECT YOUR SIGN UNTIL YOU HAVE RECEIVED COUNCIL'S DECISION ON YOUR APPLICATION. ANY ILLEGAL SIGNS OR SIGNS THAT DO NOT COMPLY WITH THE CONSENT MAY BE REMOVED BY COUNCIL.

- Some signs may not require a Resource Consent. If in doubt, check with Council Planning staff.
- Signs that are illegal, dangerous or without current consent may be removed.
- Provision for election signs is contained within Council's Policy Manual.

***Details of Applicant, Owners and Occupiers***

Full Name of Applicant:.....  
(First Names) (Surname)

Postal Address of Applicant:.....  
.....  
.....

Applicant's Contact Number: .....Private  
.....Business  
.....Facsimile  
.....Email

Name and address of owner and/or occupier of property on which sign to be erected:  
.....  
.....  
.....

***Details of Property Concerned***

Valuation Roll Number (from rates demand).....

Legal Description:.....  
.....  
.....

Certificate of Title Reference:.....

Zone:.....

**Application Details**

Please explain the reason for the application and for choosing this site: .....

.....

.....

.....

Will your sign be illuminated or contain flashing lights? If so, please indicate what type of lighting will be used.....

.....

Will your sign contain reflective material? If so, please indicate which areas of the sign will be reflective.....

.....

If this sign is temporary, when will it be removed?.....

**New Zealand Transport Agency (formerly Transit NZ) Approval**

State Highway Number:.....

Do you have consent from New Zealand Transport Agency?  Yes (enclose copy of consent)

(This is required if the sign is adjacent to a State Highway and does not comply with Rule 7.7.1.2 in the Proposed Buller District Plan. Check with Council Planning staff if unsure.)

No (you must send all details of this application to New Zealand Transport Agency, PO Box 1479, Christchurch, Attention: Regional Planner), then forward the response to the Buller District Council.

**Other Affected People**

Obtain consents from your immediate neighbours, persons across the road, or anyone who is going to be visually affected by your sign, ie can easily see it from their property.

Name	Address	Is consent form enclosed & signed <b>YES/NO.</b>

### **Diagram**

Please attach a diagram indicating the following:

- (a) Size of sign.
- (b) Colour of sign.
- (c) Exact message and dimensions of lettering and symbols.
- (d) How you intend to fix it to the ground/building.
- (e) A site plan showing exactly where you intend to erect it. (Provide several alternate locations for each sign in case first choice is not acceptable.)
- (f) Minimum letter height for various approach speeds:

<b>Approach Speed of Traffic (km/h)</b>	<b>Minimum Legibility Distance Required</b>	<b>Minimum Letter Height</b>
50	80m	120mm
70	130m	160mm
90	170m	160mm
100	220m	160mm

*(Source: New Zealand Transport Agency)*

### **Have you remembered to:**

- 1. Complete all sections
- 2. Enclose - Deposit 
  - Site Plans
  - Sign Details
  - Affected Parties
- ..... Copy of Certificate of Title

Please contact Planning staff with any queries. (Telephone: 03 788 9111)

Dated this \_\_\_\_\_ day of \_\_\_\_\_ 200

Signed: \_\_\_\_\_  
(to be signed by or on behalf of applicant)