

## Transfer Ownership of Resource Consent "Change of Name"

**Transfer one consent**

Fee of \$97.75

**Transfer two or more consents on one property**

Fee of \$ 126.50

**Transfer consents on different properties**

Deposit of \$126.50 + any additional staff time

*Please Note: Either party may pay this fee. All fixed deposits are Inclusive of GST  
(GST # 051 227 875) Council does not invoice for this fee*

### IMPORTANT: PLEASE READ

- Any questions please contact Council's Consents Advisor, Annette Brosnan on 06 833 8090, or email: [annette@hbrc.govt.nz](mailto:annette@hbrc.govt.nz)
- This form and fees are for permanent transfers of whole interests only, for partial or temporary transfers please contact the Consent Advisor.
- The deposit must accompany your application.
- Fill in all fields, Questions may be answered in attached documentation in necessary
- After the form is completed, print, sign and send the original, along with deposit to: Consents Advisor, Hawke's Bay Regional Council, Private Bag 6006, NAPIER 4142
- For Transfer of consent payments via online banking, Make payment by internet banking (BNZ - 02 0700 030 2819 00) and use the references:
  - 403 007 1120
  - Name of the new consent holder
- Ensure both sections of the form are signed. Do not submit the form with only one section signed.
- Once the signed document and the required fee is submitted, Council will re issue the legal consent documents in the new name, notice will be sent to the new owner via post.

1 **Resource consent number(s) to be transferred**

\_\_\_\_\_

- Advise me if there are other consents **under this client name** I have not listed above.
- Advise me if there are other consents **on this property** I have not listed above.

2 **Full name of the current consent holder(s)** \_\_\_\_\_

\_\_\_\_\_

3 **Full forwarding address of current consent holder**

\_\_\_\_\_ Phone Pvt. \_\_\_\_\_  
\_\_\_\_\_ Phone Bus. \_\_\_\_\_  
\_\_\_\_\_ Fax. \_\_\_\_\_  
Post code \_\_\_\_\_ Contact person \_\_\_\_\_

4 **Full legal name of the new consent holder**

- Trust  Partnership (PS)  Company  Private Person(s)  Other

Trust/ PS or Company Name \_\_\_\_\_

*\*For Trusts/Estates or Partnerships the name of the Trust/Estate/PS above **and** the full legal names of all trustees/executors/partners are required below.*

First name(s): \_\_\_\_\_

Middle name(s): \_\_\_\_\_

Last name(s): \_\_\_\_\_

Contact Person \_\_\_\_\_

5 **Full address of new consent holder**

Applicant's Postal Address \_\_\_\_\_ Telephone Pvt. \_\_\_\_\_  
\_\_\_\_\_ Bus. \_\_\_\_\_  
\_\_\_\_\_ Mob. \_\_\_\_\_  
\_\_\_\_\_ E-mail \_\_\_\_\_  
Post Code: \_\_\_\_\_

6 **Does the new consent holder intend to carry out the same activity for which the consent was originally issued? Yes 'no changes'  No 'different'**   
*(If 'no' a change of conditions application is also required)*

7 **Street address of property** \_\_\_\_\_

8 **Legal description of property (on your land title or rates notice)** \_\_\_\_\_

\_\_\_\_\_

*Please note you cannot change the property(s) this consent relates to on this form*

9 It is understood by the current consent holder that all costs incurred by the Hawke's Bay Regional Council for and incidental to the collection of any debt relating to consent processing costs, water information services charges, scientific investigation and compliance monitoring charges of this resource consent prior to the date that the Transfer is issued, may be borne by you as consent holder as a debt due to the Council, and for that purpose the Council reserves the right to produce this document in support of any claim for recovery.

It is agreed by the new consent holder that it is a term of the granting of this resource consent that all costs incurred by the Council for, and incidental to, the collection of any debt relating to this resource consent, whether as an individual or as a member of a group, and charged under s36 of the Resource Management Act, shall be borne by you the consent holder as a debt due to the Council, and for that purpose the Council reserves the right to produce this document in support of any claim for recovery.

Please note that all information collected and held by the Hawke's Bay Regional Council is public information under section 2 of the Local Government Official Information and Meetings Act 1987 (LGOIMA), as such any and all information may be requested by a third party. Access to information held by Council is administered in accordance with LOGIMA and the Privacy Act 1993. If you have any concerns over the disclosure of any aspect of your consent or personal/property details, either in person or electronically, you must raise your concern in writing to The Council and detail what "good reason" you believe there is for withholding information pursuant to section 7 of LGOIMA. Council will assess your request and advise you of any decision made. Please note that no person has the right of veto over any information held by Council. Council intends for all information it holds, submitted without a request for non disclosure (as above), to be public, and accessible to any persons who requests it pursuant to LGOIMA. If you require more information on the situations that information may be provided please contact the Councils Consents Advisor

10 It is understood by the new consent holder(s) that the full responsibility of maintaining the conditions of the original consent are passed to them at this time. The new consent holder takes responsibility for all costs incurred by Hawke's Bay Regional Council in relation to this consent which may include, but is not limited to: The replacement consenting process, water information services charges, full annual scientific investigation and compliance monitoring charges, some annual charges will lie as they fall.

11 **For a change of company name or estate settlements** the signatories to both sections below may be completed by the same person (however signing in their differing capacities).

**To be completed by the Current Consent Holder (Or authorised agent):**  
Confirming your approval for the transfer in consent title and acceptance of the details in this form

Signature of current consent holder: \_\_\_\_\_

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Please print full name of person who signed above.

*Should you have any questions with regards to the giving of approval for this transfer, please contact the Council's Consents Advisor on 06 833 8090.*

**To be completed by the New Consent Holder (Or authorised agent):**  
Confirming your approval for the transfer in consent title and acceptance of the details in this form

Signature of new consent holder: \_\_\_\_\_

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Please print full name of person who signed above.

*The deposit must accompany the transfer. The application will not be processed until the deposit is received.*