Submission on Proposed Waipara Catchment Environmental Flow and Water Allocation Regional Plan



Full Name: WATHE Commen Phone: 3149	141
Organisation:* Personal Phone:	
Postal Address: 6 C, 16e-+ S+ Fax:	
Amberely Date: 11/6/	10
7410 • the organisation that this	s submission is made of the fail of HCH FILE PREF PAR - 6 9 7 9 - 18
email	DOCUMENT No. 70 KO2
Postal address for service of person making submission (if different from above):	1 1 1 2 2
	- <u> 5 JUN 2010</u>
Signature:	
serice, becomes public information.	
Schedule 1 of the Resource Management Act, 1991	egional Plan under Clause 6 of
Tick this box if you do not wish to be heard in support of your submission;	Phone: 6 C. 6c. + S + Fax: Problem of the Content
Tick this box if you do wish to be heard in support of your submission; and,	
Tick this box if you would be prepared to consider presenting your submission in a joint cas submission at any hearing.	se with others making a similar
Return your signed submission by Monday 14th June 2010 to:	
Freepost 1201 Proposed Waipara Catchment Environmental Flow and Water Allocation Regional Plan Environment Canterbury	3
P O Box 345 Christchurch	
Emr" mailroom@ecan.govt.nz	
parate provision).	
page 20 and 21 (Table 1 minimum flows)	in (partial restrictions)
assess are vision being submitted on, or wish to have amendments made, giving reasons.	.)
partial restrictions	
can be the easier it will be for the Council to understand your concerns.)	
To keep the minimum flows & rem	ove all reference
to partial restrictions	ν