

Submission on Proposal for the Canterbury Regional Pest Management Plan 2017-2037

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Return your signed submission by 5:00pm, Monday 3 July 2017:

By Post:	Or by email:		
Freepost 1201	pestreview@ecan.govt.nz		
Proposal for the Canterbury Regional Pest Management Plan			
P O Box 345			

Christchurch 8140

Full Name: Petter Graham

Phone (Hm): 033296657

Organisation*:

* the organisation that this submission is made on behalf of (where applicable)

Postal Address: 39 Aharis Road Phone (Cell):

No2Rs Christian Postcode:

Email: Piakgraham Ograficon Fax:

Contact name and postal address for service of person making submission (if different from above):

Signature:

Signature of person making submission or person authorised to sign on behalf of person making the submission – Please note a signature is not required if the submission is made by electronic means).

I do not wish to be heard in support of my submission; or
I <u>do</u> wish to be heard in support of my submission; and if so,
I would be prepared to consider presenting my submission in a joint case with others making a similar
submission at any hearing

(1) The specific Proposal that my relates to are:	provisions of the y submission	(2) My submission is that: (include whether you support or oppose the specific parts/provisions of the Proposal, or wish to have them amended, and the reasons for your views)		(3) I seek the following decisions from Environment Canterbury: (Please give precise details for each part/provision.		
Part & Page Number	Sub-part/ Provision	Oppose/support (in part or full)	Reasons	The more specific you are the easier it will be for the Council to understand your concerns)		
Page 54			The 50 Square metre is not practical on hill country a Should be renoved			

310-15 30 JUN 17 CARRIED BY NEW EEAUADD BOST <<<>>>> GOT A QUESTION? VISIT WWW. NZPOST. CO. NZ-HELP <<<

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P.O. Box 345 Christ Luch 8140