DUNEDIN CITY
COUNCIL
Kaunihera-a-rohe o Otepoti
CITY PLANNING

APPLICATION FORM FOR REMISSION OF DEVELOPMENT CONTRIBUTIONS

APPLICANT DETAILS

Name of Applicant:

Address for Service:

Phone: **Fax:**

Email:

RMA and/or ABA Number:

PROPERTY DETAILS

Address:

Property ID:

Amount of Development Contribution Levied: **$**

REASON FOR APPLICATION

○ No additional demand ○ Contribution already paid ○ Other:

SUPPORTING EXPLANATION *(Please Attach Additional Material)*

SUPPORTING EXPLANATION (CONTINUED)

Signature of Applicant: **Date:**

PLEASE NOTE

Once this application form has been completed, deliver or post your application to:
City Planning
Dunedin City Council
1st Floor, Civic Centre
50 The Octagon
PO Box 5045
Dunedin

For further information contact the Dunedin City Council Planning Enquiries Team on:
Phone 03 477 4000
Fax 03 474 3451

FOR OFFICE USE ONLY

Reference: **Person ID:**

Received: **Report to Council:**

Decision by Council: **Applicant Advised:**