

## Request for Remission of Development Contributions

50 The Octagon, PO Box 5045, Moray Place Dunedin 9058, New Zealand Ph 03 477 4000 | www.dunedin.govt.nz

Applicant Details	
Full Name:	
Mailing Address:	
	Postcode:
Telephone (Day):	Mobile:
Email:	
Development Details	
Development Address:	
Consent Number:	Assessment Amount:
Assessment Date:	Assessment Received:
Grounds for Remission	
Are you seeking a partial or full remission?	Partial Full
Please tick which of these grounds that you are seeking	a remission under:
The actual cost of the capital project to be funded by used as the basis for the contributions indicated in t	y development contributions, or a revised estimate, is lower than the cost the policy.
You will fund or otherwise provide for the same rese	erve, network infrastructure, or community infrastructure.
	nded by development contributions are no longer to be undertaken.
Other	
Explanation of Request	
	For each of the grounds you have ticked above, detail why a remission in information that supports your request. The development contributions

Explanation of Request continued	
Do you wish to be heard on your request?	
Declaration	
I certify that, to the best of my knowledge and belief, the information given in this request is true and correct.	
Signature of Applicant/Agent: Date:	
Privacy – Local Government Official Information and Meetings Act 1987	
Under this Act, any person can request applications lodged with the Council. The Council is obliged to make available the information requested unless there are grounds under the above Act that justify withholding it. While you may request that it withheld, the Council will make a decision, following consultation with you. If the Council decides to withhold an application, part of it, that decision can be reviewed by the Office of the Ombudsmen.	
Please advise if you consider it necessary to withhold your application, or parts of it, from any persons (including the media) (tick those that apply):	
Avoid unreasonably prejudicing your commercial position.	
Protect information you have supplied to Council in confidence.	
Avoid serious offence to tikanga Māori or disclosing location of waahi tapu.	
Lodging your Request	
Your request for a reconsideration must be made within 10 working days after the date on which you received notice from the Council of the level of development contributions required.	
You can lodge your request:  In person: Customer Services Centre, Ground Floor, Civic Centre, 50 The Octagon  By mail: Dunedin City Council, PO Box 5045, Moray Place, Dunedin 9058  By email: development.contributions@dcc.govt.nz	
There is also information on our website at <b>www.dunedin.govt.nz</b> .	

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