

# Submission Form

## Proposal for the Variation of the City Mall Special Order

PLEASE READ BEFORE COMPLETING YOUR SUBMISSION

The public consultation period is from  
Monday 17 March 2008 to Monday 21 April 2008

It will help us if you:

- Clearly state the issue you want the Council to consider:
  - What specific action you think the Council should take, and;
  - Why that should be done.
- Type or use black ink for your submission.

Please Note: We are legally required to make all written or electronic submissions available to the public and to Councillors, including the name and address of the submitter (subject to the provisions of the Local Government Official Information and Meetings Act 1987). If you consider there are compelling reasons why your contact details and/or submission should be kept confidential, you should contact the Assistant Council Secretary Kevin Roche,

Telephone 941 8112.

Submissions will be published on the Council's website from 2 May 2008.

You may send us your submission:

### On the internet:

You may enter your submission using the form provided on the Council's website at [www.ccc.govt.nz](http://www.ccc.govt.nz).

Please follow all the instructions on the website.

### By email:

[consultation@ccc.govt.nz](mailto:consultation@ccc.govt.nz)

Please make sure that your full name and address is included with your submission.

### By mail:

(no stamp is required) to

Freepost 178  
City Mall Special Order  
Christchurch City Council  
PO Box 237  
Christchurch

**No anonymous submissions will be accepted. Whether you use this form or not, you must provide your full name, address and telephone number. If you are submitting on behalf of an organisation, please state this as your role within that organisation.**

**Submissions must be received (NOT postmarked) at the Tuam Street Civic Offices no later than 5pm on Monday 21 April 2008. To ensure receipt, hand deliver last-minute submissions to the Civic Offices, 163-173 Tuam Street.**

### Your Submission

If you wish, you can present your submission at a hearing. If that is the case, please tick the appropriate box below. Five to ten minutes will be allocated for speaking to your submission, including time for questions from the Councillors. The Council will confirm the date and time of your hearing in writing, by email or by telephone call.

Tick  I do NOT wish to discuss my submission at the hearing, and ask that this written submission be considered

OR

I wish to discuss the main points in my written submission at the hearings.

Are you completing this submission:  For yourself  On behalf of a group or organisation

If you are representing a group or organisation, how many people do you represent?

Your Name

Glenn Banks

Organisation Name (if applicable) \_\_\_\_\_

Organisation Role (if applicable) \_\_\_\_\_

Contact Address

149 Maiz RD Redcliffs

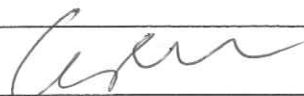
Phone No. (day)

3847490

Phone No. (evening) \_\_\_\_\_

Email (if applicable) \_\_\_\_\_

Signature



Date

26/3/08

