



Application for Road Naming

To: Resource Consent Manager

Kaipara District Council

Unit 6

6 Molesworth Drive

Mangawhai 0505

Office use only

Application number:

Date received:

mailto:rmaconsents@kaipara.govt.nz

Applicant details		
Name/s (please write all names in full) Note : Applicant must be a person or Trust is required.	n or legal entity. Full name of Individual, Limited Liabilit	ty Company
Or company/trust/organisation		
Postal address	Postcode	
Telephone - Mobile	Home	
Email		

Road Details		
Is this road to be vested to Council?	Yes	No
Has the road been vested to Council?	Yes	No
Are you the subdivider that created the road/private accessway?	Yes	No
If you are not the subdivider, please provide letters of support from all owners who have a legal right to access the private accessway.	Yes	No
Is this a private accessway (right of way or jointly owned access lot)	Yes	No
What is the resource consent no. that created this road?	RM	

Road's legal description
Location of road – please provide a map

Document Name:	Version	QAM Author	Date	Page
Road Naming Application	1	QAM	Jan 2024	1 of 2



Proposed Road Names				
Explanation and/o	or evidence to be provided demonstrati	ng how proposed names meet <u>KDC Road Naming</u>		
Name One				
Reason				
Name Two				
Reason				
Name Three				
Reason				
If the road is a pu	ablic road and you are proposing a Mā	ori road name, you need to engage with mana whenua		
and obtain a letter from them in support of the proposed name. Engagement with mana whenua is not required				
to propose a Māori name for a private way. Click on this link Engaging with mana whenua.				
Notes Application Face				
Note: Application Fees				
Please refer to Council's current Fees and Charges Schedule for the relevant fee on our website http://www.kaipara.govt.nz/services/fees-charges .				
Fees I have paid the fee of \$ for the processing of this application.				
Thave paid the le		of this application.		
Declaration				
The information I have supplied with this application is true and complete to the best of my knowledge.				
Name:				
Signature:	nature: Date:			

Document Name:	Version	QAM Author	Date	Page
Road Naming Application	1	QAM	Jan 2024	2 of 2