



Further Submission on a Publicly Notified Plan Change to the Whanganui District Plan

Resource Management Act 1991 In accordance with Form 6 – RM (Forms, Fees and Procedure) Regulations 2003

TO: Whanganui District Council, PO Box 637, Whanganui

Name: (print in full) IAN BARTLET

This is a further submission on Plan Change No. 001 to the Whanganui District Plan. Closing Date: 27/7/26

1. I support or oppose the submission of:

Rose Burcin, 33A Manuka Street,
Castlecliff

(Please state name and address of person making original submission and submission number of original submission)

2. The particular parts of the submission I / we support or oppose are:

objection to high density housing

(Clearly indicate which parts of the original submission you support or oppose, together with any relevant provisions of the Proposed Plan Change. Use additional pages if required)

3. The reasons for my / our support or opposition are:

(Please state in summary the nature of your submission giving clear reasons)

- Manuka street is a residential neighbour
- road made of of 1/4 acre sections
high density housing will destroy the
character of the neighbourhood
- There are not appropriate road safety
infrastructure to support, safely, the increase
in vehicle + pedestrian
carriage high density housing
will create.

(Use additional pages if required)

FS 12



4. I seek the following decision from the Council (*Give precise details*):

.....the council must revisit the concept of
.....zoning to allow multiple developments
.....
.....
.....

Use additional pages if required

5. I ~~do~~ ~~not~~ wish to be heard in support of this submission.

6. If others make a similar submission I would / ~~would not~~ be prepared to consider presenting a joint case with them at any hearing.

7. Address for service:

.....27 Manuka St
.....4501
.....

Signature:

(Person making submission or person authorised to sign on behalf of person making submission)

~~Day~~ time phone No:

Email:i.bartlett@gmail.com.....

Date:19/02/26.....