

Water race closure affected parties consent survey

Please return this completed survey form by **[closing date]** to Ashburton District Council:
info@adc.govt.nz or Ashburton District Council, PO Box 94, Ashburton 7740

To be completed by applicant:	
Applicant name:	
Location of proposed works:	
Description of proposed works:	
To be completed by affected party:	
Name:	
Company/farm name:	
Address:	
Phone:	Email address:
Mobile:	Property number:
Do you support the proposed works?	
<input type="checkbox"/> Yes <i>(if yes, please sign below & return this first page only)</i>	
<input type="checkbox"/> No <i>(if no, please proceed to the next page and complete the survey questions)</i>	
Section one - Consent	
<p>I/we, the undersigned, being the legal owner/occupier of the above property:</p> <ol style="list-style-type: none"> (1) have inspected the plan and description of the proposed work, (2) hereby give my/our approval of the proposed works to proceed, (3) understand that, if I give my approval, the Ashburton District Council shall not take into account any effects that the proposed activity may have on me/us when considering the application. 	
Signed: _____	
Name: _____	Date: _____
(Please print name)	

ASHBURTON DISTRICT COUNCIL

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Ashburton

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Section two - Survey

1. Describe your farming operation: (tick all that apply)

- | | | | |
|--------------------------------|--|---------------------------------------|----------------------------------|
| <input type="checkbox"/> Sheep | <input type="checkbox"/> Dairy farm | <input type="checkbox"/> Cropping | <input type="checkbox"/> Pigs |
| <input type="checkbox"/> Beef | <input type="checkbox"/> Dairy runoff | <input type="checkbox"/> Horticulture | <input type="checkbox"/> Poultry |
| <input type="checkbox"/> Deer | <input type="checkbox"/> Dairy grazing | <input type="checkbox"/> Lifestyle | |

2. If you ticked lifestyle, please list your approximate livestock numbers:

Sheep _____	Pigs _____	Poultry _____
Cattle _____	Calves _____	Horses _____
Deer _____	Other _____	

3. Do you rely on the open race stockwater for stock or domestic purposes?

- | | |
|---|---|
| <input type="checkbox"/> No (if no, skip to question 7) | <input type="checkbox"/> Yes –for domestic use only |
| <input type="checkbox"/> Yes – for stockwater only | <input type="checkbox"/> Yes – for both stockwater and domestic |

4. Do you use the open stockwater race all year round?

- Yes No

If no – how many months of the year & for what purpose (winter - dairy or lamb grazing etc):

5. In terms of meeting your needs, is it:

- Good Adequate Unsatisfactory

6. If “unsatisfactory” in question 5, please given reasons why (tick all that apply)

- | | |
|---|---|
| <input type="checkbox"/> Variable quality or discoloured | <input type="checkbox"/> Inconvenient to your farming operation |
| <input type="checkbox"/> Unreliable supply | <input type="checkbox"/> High maintenance requirement |
| <input type="checkbox"/> Poses a risk to stock or personal health | <input type="checkbox"/> Other _____ |

7. Do you have a groundwater bore/s (well) on your property?

- No (If no, skip to question 11) Yes

8. If yes, please indicate diameter and depth:

Bore diameter (tick one only):

- | | | |
|-------------------------------|--------------------------------|---|
| <input type="checkbox"/> 50mm | <input type="checkbox"/> 100mm | <input type="checkbox"/> 200mm |
| <input type="checkbox"/> 75mm | <input type="checkbox"/> 150mm | <input type="checkbox"/> Other (<i>specify</i>) _____ |

Bore depth (tick one only):

- | | | |
|-------------------------------------|----------------------------------|---|
| <input type="checkbox"/> <20 metres | <input type="checkbox"/> 40-<60m | <input type="checkbox"/> 80-<100m |
| <input type="checkbox"/> 20-<40m | <input type="checkbox"/> 60-<80m | <input type="checkbox"/> 100m or deeper |

How many wells do you have on your property in total _____

9. Do you use the well/s for:

- | | | |
|-------------------------------------|-------------------------------------|-----------------------------------|
| <input type="checkbox"/> Irrigation | <input type="checkbox"/> Stockwater | <input type="checkbox"/> Domestic |
|-------------------------------------|-------------------------------------|-----------------------------------|

10. How would you describe the reliability of your well/s?

- Reliable (*ie water always available*)
- Adequate (*ie water unavailable 1 or 2 times in past 10 years*)
- Unsatisfactory (*ie long periods when water is unavailable*)

11. Do you have water storage facilities on your property?

- | | |
|-----------------------------|------------------------------|
| <input type="checkbox"/> No | <input type="checkbox"/> Yes |
|-----------------------------|------------------------------|

Please indicate the storage type below:

- | | | |
|--|---|--------------------------------------|
| <input type="checkbox"/> Irrigation pond/s | <input type="checkbox"/> Storage tank/s | <input type="checkbox"/> Other _____ |
|--|---|--------------------------------------|

12. Do you have an irrigation system on your property?

- | | | |
|-----------------------------|--|--|
| <input type="checkbox"/> No | <input type="checkbox"/> Yes permanently reticulated | <input type="checkbox"/> Yes – portable pipework |
|-----------------------------|--|--|

13. Do you receive water from an irrigation company?

- Yes - if yes, which company _____

Please indicate what type of water you receive:

- | | | |
|---|-------------------------------------|-------------------------------|
| <input type="checkbox"/> Irrigation water | <input type="checkbox"/> Stockwater | <input type="checkbox"/> Both |
|---|-------------------------------------|-------------------------------|

- No - if no, how close are you to an irrigation companies piped or open race scheme?

- | | |
|--|--------------------------------------|
| <input type="checkbox"/> Less than 1km | <input type="checkbox"/> 1km or more |
|--|--------------------------------------|

Please specify which scheme (eg BCI, Spaxton, ALIS, MHV) : _____

14. Do you have a reticulated stockwater trough system on your property?

- | | |
|------------------------------|---|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No (<i>If no, skip to question 16</i>) |
|------------------------------|---|

15. If yes, do you believe that the trough system is a satisfactory or better alternative to the open stockwater race?

- | | |
|------------------------------|-----------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No |
|------------------------------|-----------------------------|

16. If you do not support the proposed works, please give reasons why (tick all that apply)

- | | | |
|---|--|---|
| <input type="checkbox"/> Stock use | <input type="checkbox"/> Domestic | <input type="checkbox"/> Fire-fighting |
| <input type="checkbox"/> Irrigation (including gardens etc) | <input type="checkbox"/> Ecological values | <input type="checkbox"/> Other reasons (<i>specify below</i>) |

Please specify other reasons:

17. Any additional comments:

Signature and date:

Signed: _____ **Date:** _____

Name: _____

(Please print your name)

The Ashburton District Council appreciates your response to this survey. The information obtained will be used to enable Council to make informed decisions in regard to the race closure and/or assist in the development of alternatives to the open race stockwater system in your area. This information may be disclosed to other parties who would be affected by a stockwater race closure.

If you would prefer the information you have provided to remain confidential, please tick this box.