



Submission on the Draft Ruatihi o Paeroa Scenic Reserve Management Plan

Name: _____

Address: _____

Phone: _____

Email: _____

I / we wish to be heard in support of my / our submission. (Please tick)

(Hearings will be held on the 10 / 11 July 2020 at the Trust Office, 410 State Highway 38, Reporoa)

Provision	Topic/Text	Comment	Relief Sought

