

ATTACHMENTS

UNDER SEPARATE COVER 1

Ordinary Council Meeting

23 May 2022

Table of Contents

4.1 To hear and deliberate on the Annual Plan 2022-23, Fees and Charges 2022-23, Significance and Engagement Policy, and TownCentre Taupo Targeted Rate

Attachment 1 Attachment 1: Full bundle of submissions for Annual Plan 2022-23.....3

1



First name: james

Last name: wotherspoon

Age:

55-64

Gender:

Male

Ethnicity:

Pakeha / NZ European

HEARING: Let us know if you wish to speak at a hearing and your preferred location. *

I do NOT wish to speak in support of my submission and ask that the following submission be fully considered.

Feedback

In our consultation document, we set out how Council's decision on whether to modify the delivery timeline of a project will be guided by the criteria below.

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2. prioritisation in line with the eight strategic priorities that we identified and developed as part of the LTP
3. resource considerations such as the availability of materials, contractors, and appropriately skilled staff

Read our Consultation document [HERE](#)

Do you agree with these criteria?

Mostly disagree

Do you have any comment to share with us?

where the one that should say strongly disagree, there are two strongly agree

Council has highlighted a number of proposed changes to some of its key projects, please let us know if you agree with these changes.

You can read about changes to our capital expenditure programme [HERE](#)

Water projects - Do you agree with these changes?

I don't know

Do you have any comment to share with us?

Transport projects – Do you agree with these changes?

T24Consult Page 1 of 3

1

Strongly disagree

Do you have any comment to share with us?

Community facilities projects – Do you agree with these changes?

I don't know

Do you have any comment to share with us?

Wastewater projects – Do you agree with these changes?

Neither agree nor disagree

Do you have any comment to share with us?

Solid waste projects – Do you agree with these changes?

Neither agree nor disagree

Do you have any comment to share with us?

Investments projects – Do you agree with these changes?

I don't know

Do you have any comment to share with us?

Council has updated some of its fees and charges and made some changes to how they are structured.

We provide a wide range of services and functions to the community that carry costs. Some of these costs are paid for out of general or targeted rates and others are recovered from government. However, where a service or activity benefits an individual customer (e.g., a dog registration benefits an individual dog owner, or a resource consent benefits the individual applicant), Council applies a fee to cover the cost of delivering that service. Read more [HERE](#)

Overall, do you agree with these changes?

Neither agree nor disagree

Do you have any comment to share with us?

We are proposing some changes to our Significance and Engagement policy.

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Overall, do you agree with these changes?

I don't know

Do you have any comments to share with us?

1

We are proposing a slight increase to the Town Centre Taupō Management targeted rate.

Towncentre Taupō (TCT) is a member-based organisation established to promote the development of Taupō's Central Business District as a safe and vibrant space, while retaining our town's unique identity. All businesses operating within Taupō's town centre are therefore members of TCT by default. Council supports TCT in its work through a dedicated target rate which is paid by TCT members as part of their annual rates.

Read more [HERE](#)

Do you agree with this increase?

Mostly agree

Do you agree with these criteria?

Mostly agree

Do you have any comments to share with us?

Attached Documents

File
No records to display.

2



First name: shane

Last name: king

Age:

35-44

Gender:

Male

Ethnicity:

Pakeha / NZ European

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Mostly disagree

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Water projects - Do you agree with these changes?

Mostly agree

Do you have any comment to share with us?

Transport projects – Do you agree with these changes?

Mostly agree

T24Consult Page 1 of 3

2

Do you have any comment to share with us?

Community facilities projects – Do you agree with these changes?

Mostly agree

Do you have any comment to share with us?

Wastewater projects – Do you agree with these changes?

Mostly agree

Do you have any comment to share with us?

Solid waste projects – Do you agree with these changes?

Strongly agree

Do you have any comment to share with us?

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Read more [HERE](#)

Do you agree with this increase?

Mostly agree

Do you agree with these criteria?

Mostly agree

Do you have any comments to share with us?

Attached Documents

File
No records to display.

3



First name: Susan
Last name: Abraham

Age:
55-64

Gender:
Female

Ethnicity:
Other

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Do you agree with these criteria?

Strongly disagree
Do you have any comment to share with us?

TDC should be no different to any person in N right now. Its is an unequivocal fact that there are more struggling financially than those not. Any economist would identify this as a social issue and advise against rate rises above pay rises seen in public and private sector unless a council wishes to push its ratepayers to a level of economic decline. You are doing just that

Council has highlighted a number of proposed changes to some of its key projects, please let us know if you agree with these changes.

You can read about changes to our capital expenditure programme [HERE](#)

Water projects - Do you agree with these changes?

Do you have any comment to share with us?

T24Consult Page 1 of 3

3

I cannot support any proposal that increases the financial burden to the community of Taupō. Taupo residents should not be asked to shoulder higher financial burdens at this time.

Transport projects – Do you agree with these changes?

Strongly disagree

Do you have any comment to share with us?

Ask yourselves who has received anywhere near the increase in incoming's to cover your, frankly obscene, proposed rate rises to fund any project. As a council you are so out of touch with those who pay rates and fund these changes it's bordering on a psychotic proposal

Community facilities projects – Do you agree with these changes?

Strongly disagree

Do you have any comment to share with us?

Who thinks about spending the way TDC are proposing when daily facing the impact of reduced revenue due to Covid, increased costs of living and less than inflation pay rises. My initial thoughts were your proposal for expenditure was an early Aptil Fools joke. Then I realised sadly TDC was serious

Wastewater projects – Do you agree with these changes?

Strongly disagree

Do you have any comment to share with us?

How about you come up with proposals within TDC current budgetary abilities

Solid waste projects – Do you agree with these changes?

Strongly disagree

Do you have any comment to share with us?

There have been decades to sort this.

Investments projects – Do you agree with these changes?

Strongly disagree

Do you have any comment to share with us?

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Overall, do you agree with these changes?

Strongly disagree

Do you have any comment to share with us?

This is the biggest blow ever. Your staff didn't receive over inflation ay rises wo how can you justify this

3

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Strongly disagree

Do you have any comments to share with us?

TDC is so out of touch with the community its obscene you even think you represent anyone in the area now

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Do you agree with this increase?

Strongly disagree

Do you agree with these criteria?

Strongly disagree

Do you have any comments to share with us?

This is so badly timed. Has TDC been unaware of the impact of Covid on its town

Do you have any other feedback?

My feedback is TDC need to seriously rethink any expenditure above what can realistically be managed on a revenue increase in line with that of the payises of the population. Any project based on government funding or reliant on a rates increase needs to be rethought now. Your other option is to continue acting as a council that is out of touch with reality

Attached Documents

File

No records to display.

4



First name: Jeremy

Last name: Rickman

Age:

75+

Gender:

Male

Ethnicity:

Pakeha / NZ European

HEARING: Let us know if you wish to speak at a hearing and your preferred location. *

I do NOT wish to speak in support of my submission and ask that the following submission be fully considered.

Feedback

Transport projects – Do you agree with these changes?

Mostly agree

Do you have any comment to share with us?

Kinloch speed limits / changes .

Having had a holiday home at 22 Kenrigg Road for over 30 years , I strongly believe that the speed limits in the old village should be 40 maximum .

The speed cars with boats on trailers coming down Kenrigg road is excessive . Its only a matter of time when someone , particularly a child ,is seriously injured or worse .

Kinloch is a holiday destination primarily and the speeds should reflect that . Many streets in Hamilton have a 40 limit !

Attached Documents

File

No records to display.

5



First name: Julie

Last name: Yeoman

Age:

45-54

Gender:

Female

Ethnicity:

Pakeha / NZ European

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Water projects - Do you agree with these changes?

Strongly agree

Do you have any comment to share with us?

Bonshaw Park Drinking Water Standards upgrade 2021-23 \$2.37 million No anticipated changes. On track as planned

As quoted above from p21 of your consultation document, can you please ensure this project is completed in the timeframe stated. As we are nearly 18mths through the 3 year time period 2021-2023 with no evidence out at Bonshaw Park of our water scheme being connected to town, I am concerned that this project will in fact be carried out. The depth of my concern centres around the 3 Waters Proposal and that we could see any hope of this work being completed vanish once it is under central government control.

Attached Documents

File

No records to display.

6



First name: Janet

Last name: Hird

Age:

65-74

Gender:

Female

Ethnicity:

Pakeha / NZ European

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Do you agree with these criteria?

Neither agree nor disagree

Do you have any comment to share with us?

I see you've been carrying forward rather large funding in your budget. If you already have so much in your accounts, why do you need million more from rates to add to it?

The purchasing of carbon credits to offset green house gases is a wrought! what happens to this money? how does it improve the planet? we need to improve our ways so we can't use it as an excuse by purchasing carbon credits and thinking we are clean.

Upgrading all of your vehicles to electric ones was a knee jerk reaction. was this a budgeted cost or a pipe dream? did it need to be done in one go? Such an expense. Electric vehicles aren't a perfect solution to the world's problems either.

I recently watched one of your vehicles pick up bottles on Lake Terrace. It drove backwards and forwards over and over the area. it would have been much more efficient to have a small vehicle present with a man or men picking them up manually and throwing them into the back of the truck!!

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Water projects - Do you agree with these changes?

Mostly disagree

Do you have any comment to share with us?

Mostly disagree ... typo error on your part! Please correct it.

There are a lot of water upgrade projects in your list ... trying to catchup before Three Waters takes over? You're going to have to cut some of these projects back as I don't approve a 8.5% rates increase!

Taupo Council has always been receiving rates to cover water and wastewater expenses. You should have been planning ahead and accumulating some of this money for future water related projects already, not borrowing.

Transport projects – Do you agree with these changes?

Mostly disagree

Do you have any comment to share with us?

We are way overdue for the 2nd bridge. This project should never have been delayed. and Taupo Council shouldn't have gone ahead with its Spa Road/Tongariro Street/Titirapenga roading changes without the 2nd bridge in place.

Don't proceed with road widening projects until you have funding in place from Waka Kotahi.

Turangi Kerb and channelling put on hold for now.

How come installing a round about costs \$1 million?? Tauhara Ridge Drive doesn't meet Lake Terrace so there's nowhere to put a round about!

Definitely proceed with the Waikato River Crossing feasibility. That feasibility work should have already happened considering it's way overdue and should never have been cut out of your plans.

Completion of Town Centre Transformation is a big NO. what you have achieved with the Govt funding is more than we needed already. I am not sure how well it is all going to work considering Taupo's huge increase in population since the plans were approved more than 10 years ago - I'd say it's out of date already!

Taupo has always been a beautiful town - it has a natural beauty with its surroundings and you'd already done planting and seating in the town centre. but that wasn't enough. Good on your for putting your hand up and getting \$21m for your shovel ready town centre project. but the truth is that Taupo didn't need it. You have to stop thinking that you must constantly spend on improvements! There are soooo many projects going on right now around the town.

Community facilities projects – Do you agree with these changes?

Mostly disagree

Do you have any comment to share with us?

Removal of asbestos from elderly housing can be delayed. No knee jerk reaction required like you did with vacating the old Council building on Lake Terrace. that appalling decision has led to a massive increase in unbudgeted costs.

New neighbourhood reserves \$13 million. really?? that's a huge amount. reserves should be included in new development costs for new housing areas - and we definitely need them.

New library books \$3.4 million. really? If the libraries stopped constantly selling off their current stock of books we would have ample supply. it's like you've already told them that they're getting \$3.4 million worth of new books so they've made it their mission to make more room on their shelves. I've never seen anything like it at libraries!

Playground improvements of \$2 million. Really? I would like to add that your unnecessary new 'destination' playground on Tongariro Street isn't very different from the old playground. it certainly doesn't look like a 'must go to' playground. you've overspent on that one!

Wastewater projects – Do you agree with these changes?

Mostly disagree

Do you have any comment to share with us?

Solid waste projects – Do you agree with these changes?

Mostly agree

Do you have any comment to share with us?

Investments projects – Do you agree with these changes?

Do you have any comment to share with us?

Waiora House shouldn't have been demolished so quickly either. Another knee jerk reaction. maybe delay the rebuild until we are past this inflation/cost of living hiccup.

Civic Administration Building fitout of \$4.9 million. Would you call this an investment? It seems very excessive - an unbelievable amount in fact. probably more than what you got when you sold the Lake Terrace property. can you really justify that amount? surely you can use your existing desks and chairs etc. this sum definitely needs to be reviewed so it isn't a pipe dream. Does it include internal wiring and IT materials? surely the building owner will pay to instal this as it remains as part of the building.

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6

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Overall, do you agree with these changes?

Neither agree nor disagree
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Do you agree with this increase?

Neither agree nor disagree

Do you agree with these criteria?

Neither agree nor disagree
Do you have any comments to share with us?

Do you have any other feedback?

It's criminal if the Taupo Council thinks it ok to increase our rates by 8.5%! This follows on from a rates increase from last year which I didn't think should have happened, due to Covid and hardships some people were already going through. The cost of living (including rents and fuel, let alone food costs) are already too much for some people to bear.

6

The Council is already getting increased rates through the huge increase in new builds around town.

It's time for the Council to only do work that needs to be/must be Done; not wants or pipe dreams.

We desperately need a supermarket complex in Nukuhau - especially considering the new 750 house project planned for the area. also a new school over that way.

It's appalling planning expecting everyone to drive into the town centre to the only 2 supermarkets we have. the current Countdown site is appalling considering all the traffic in that area. it needs to be moved somewhere else.

I don't think that having a primary school right in the centre of town, with a playground on the other side of a very busy road, is appalling planning. When it was decided to move the primary school from it's original site it should have been moved further out of the town centre.

Is there anyway you can ensure that all the new houses being built (at Wharewaka, Huka and Nukuhau) are lived in and not 3rd and 4th homes for the rich who can afford to leave them empty and unlive in? empty homes do not make a community. I understand 30% of new homes in Wharewaka are empty, used occasionally as holiday homes. This must be a common problem in Taupo, as it exists in the street that we live in. It's a sad state really.

Please be smarter with your budgeting. not everyone can afford increases.

for example the Kiddle/Arrowsmith new roading fiasco was always going to be a fail. such a waste of money

also the Taupo Council feasibility to build new council premises on the reserve was a waste of money as the community never wanted it. you should have listened in the first place.

Attached Documents

File
No records to display.

7



First name: Keith

Last name: Wallace

On behalf of:

myself

Age:

65-74

Gender:

Male

Ethnicity:

Pakeha / NZ European

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Mostly agree

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Water projects - Do you agree with these changes?

Mostly agree

Do you have any comment to share with us?

7

Transport projects – Do you agree with these changes?

Mostly agree
Do you have any comment to share with us?

Community facilities projects – Do you agree with these changes?

Neither agree nor disagree
Do you have any comment to share with us?

Wastewater projects – Do you agree with these changes?

Mostly agree
Do you have any comment to share with us?

Solid waste projects – Do you agree with these changes?

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Do you have any comment to share with us?

Investments projects – Do you agree with these changes?

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Do you agree with this increase?

Neither agree nor disagree

Do you agree with these criteria?

Neither agree nor disagree
Do you have any comments to share with us?

Do you have any other feedback?

In the current economic crisis I believe it is unwise and unsustainable to ask the ratepayers to expect an average rate increase of 8.35% on rates which are already expensive, even by Auckland standards.

No mention is made as to the level of increase expected for the Regional rates which are on top of the local rates.

I would make the following recommendations:-

1. The Taupo Town Centre Transformation Project. The proposed improvements to Roberts Street and Lake Terrace, between Tongariro and Raupehu Streets should be DEFERED
2. The Council Administration Fit-out project should be DEFERED.
3. The Turangi Recreation Centre project should be DEFERED or CANCELLED.
4. Improvements to the water infrastructure should be held to a MINIMUM pending the outcome of the 3 Waters Proposal by central government.

The council has a responsibility to ratepayers to contain costs, you should be aiming for a 0% rate increase at best or at the rate of inflation CPI at worst.

Ratepayers are not an inexhaustible source of funding.

Attached Documents

File
No records to display.

7

8



First name: Ian

Last name: chamberlain

Age:

55-64

Gender:

Male

Ethnicity:

Pakeha / NZ European

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Mostly agree

Do you have any comment to share with us?

The kinloch new reservoir. With the growth in Kinloch this is a very important part of it infrastructure. May be there need to be a targeted development contribution to help get this building before running out of water there..

8

Transport projects – Do you agree with these changes?

Neither agree nor disagree

Do you have any comment to share with us?

I am concerned for safety with the projects which miss out on road improvement or widening as these road have a lot more traffic on them now then when projects were first look at.

Community facilities projects – Do you agree with these changes?

Mostly agree

Do you have any comment to share with us?

Housing for the elderly insulation improvement. This cost is only going to keep rising and it is always best to do the work in one go eg. insulation and asbestos at ones time. when you do the jobs separate it will cost 10% to 30% more.

Wastewater projects – Do you agree with these changes?

Mostly agree

Do you have any comment to share with us?

Solid waste projects – Do you agree with these changes?

Mostly agree

Do you have any comment to share with us?

More work need to be done to help reduce landfill. We been trying over the last couple of year to see how the local construction waste can be reduce or redirected. We would like to see the council more involved in if as a major stakeholder. Please note 60% of the landfill is construction waste.

Investments projects – Do you agree with these changes?

Strongly agree

Do you have any comment to share with us?

Please note the time you get to this fit out it will cost more then this budget.

Council has updated some of its fees and charges and made some changes to how they are structured.

We provide a wide range of services and functions to the community that carry costs. Some of these costs are paid for out of general or targeted rates and others are recovered from government. However, where a service or activity benefits an individual customer (e.g., a dog registration benefits an individual dog owner, or a resource consent benefits the individual applicant), Council applies a fee to cover the cost of delivering that service. Read more [HERE](#)

Overall, do you agree with these changes?

Strongly agree

Do you have any comment to share with us?

We are proposing some changes to our Significance and Engagement policy.

Council is committed to making informed and sustainable decisions in the best interests of our communities.

8

We want to ensure the decisions we make made reflect the aspirations of tangata whenua, residents, ratepayers, community groups and business. To help us to make the best decisions, we engage with our communities daily using a number of tools. Sometimes, this is simply to provide information, and other times we seek input into our decision-making processes. Read more [HERE](#)

Overall, do you agree with these changes?

Strongly agree

Do you have any comments to share with us?

We are proposing a slight increase to the Town Centre Taupō Management targeted rate.

Towncentre Taupō (TCT) is a member-based organisation established to promote the development of Taupō's Central Business District as a safe and vibrant space, while retaining our town's unique identity. All businesses operating within Taupō's town centre are therefore members of TCT by default. Council supports TCT in its work through a dedicated target rate which is paid by TCT members as part of their annual rates. Read more [HERE](#)

Do you agree with this increase?

Strongly agree

Attached Documents

File

No records to display.

9



First name: Alison

Last name: Downes

On behalf of:

Myself

Age:

65-74

Gender:

Female

Ethnicity:

Pakeha / NZ European

HEARING: Let us know if you wish to speak at a hearing and your preferred location. *

I do NOT wish to speak in support of my submission and ask that the following submission be fully considered.

Feedback

Do you have any other feedback?

The main bridge heading north over the Waikato River needs maintenance plus, plus. At present the side walls are held together with pieces of material. The traffic on this bridge is constant.

Attached Documents

File

No records to display.

10

**Organisation:**

Taupo Golf Club Incorporated

First name: Cliff**Last name:** Morgan**On behalf of:**

Taupo Golf Club Incorporated

Age:**Gender:****Ethnicity:****HEARING: Let us know if you wish to speak at a hearing and your preferred location. ***

I do NOT wish to speak in support of my submission and ask that the following submission be fully considered.

Feedback

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2. prioritisation in line with the eight strategic priorities that we identified and developed as part of the LTP
3. resource considerations such as the availability of materials, contractors, and appropriately skilled staff

Read our Consultation document [HERE](#)

Do you agree with these criteria?

Neither agree nor disagree

Do you have any comment to share with us?

Council has highlighted a number of proposed changes to some of its key projects, please let us know if you agree with these changes.

You can read about changes to our capital expenditure programme [HERE](#)

Water projects - Do you agree with these changes?

Neither agree nor disagree

Do you have any comment to share with us?

Transport projects – Do you agree with these changes?

T24Consult Page 1 of 3

10

Neither agree nor disagree
Do you have any comment to share with us?

Community facilities projects – Do you agree with these changes?

Neither agree nor disagree
Do you have any comment to share with us?

Wastewater projects – Do you agree with these changes?

Neither agree nor disagree
Do you have any comment to share with us?

Solid waste projects – Do you agree with these changes?

Neither agree nor disagree
Do you have any comment to share with us?

Investments projects – Do you agree with these changes?

Neither agree nor disagree
Do you have any comment to share with us?

Council has updated some of its fees and charges and made some changes to how they are structured.

We provide a wide range of services and functions to the community that carry costs. Some of these costs are paid for out of general or targeted rates and others are recovered from government. However, where a service or activity benefits an individual customer (e.g., a dog registration benefits an individual dog owner, or a resource consent benefits the individual applicant), Council applies a fee to cover the cost of delivering that service. Read more [HERE](#)

Overall, do you agree with these changes?

Neither agree nor disagree
Do you have any comment to share with us?

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Overall, do you agree with these changes?

Neither agree nor disagree

10

Do you have any comments to share with us?

We are proposing a slight increase to the Town Centre Taupō Management targeted rate.

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Do you agree with this increase?

Neither agree nor disagree

Do you agree with these criteria?

Neither agree nor disagree

Do you have any comments to share with us?

Do you have any other feedback?

We request that the repair work and re-marking of the access road and Carpark at Taupo Golf Club (32 Centennial Drive, Taupo) be considered. This was requested last year in June and there has been an initial consult

Attached Documents

File

No records to display.

11



First name: Elad

Last name: Berger

Age:

45-54

Gender:

Male

Ethnicity:

Pakeha / NZ European

HEARING: Let us know if you wish to speak at a hearing and your preferred location. *

I do NOT wish to speak in support of my submission and ask that the following submission be fully considered.

Feedback

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3. resource considerations such as the availability of materials, contractors, and appropriately skilled staff

Read our Consultation document [HERE](#)

Do you agree with these criteria?

Mostly agree

Do you have any comment to share with us?

Council has highlighted a number of proposed changes to some of its key projects, please let us know if you agree with these changes.

You can read about changes to our capital expenditure programme [HERE](#)

Water projects - Do you agree with these changes?

Neither agree nor disagree

Do you have any comment to share with us?

Transport projects – Do you agree with these changes?

Mostly disagree

T24Consult Page 1 of 3

11

Do you have any comment to share with us?

Community facilities projects – Do you agree with these changes?

Mostly agree

Do you have any comment to share with us?

Wastewater projects – Do you agree with these changes?

Neither agree nor disagree

Do you have any comment to share with us?

Solid waste projects – Do you agree with these changes?

Neither agree nor disagree

Do you have any comment to share with us?

Investments projects – Do you agree with these changes?

Mostly disagree

Do you have any comment to share with us?

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Overall, do you agree with these changes?

Mostly disagree

Do you have any comment to share with us?

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Overall, do you agree with these changes?

Mostly disagree

Do you have any comments to share with us?

11

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Read more [HERE](#)

Do you agree with this increase?

Strongly disagree

Do you agree with these criteria?

Mostly disagree

Do you have any comments to share with us?

Attached Documents

File
No records to display.

12



First name: Jeremy

Last name: Mason

Age:

55-64

Gender:

Female

Ethnicity:

Pakeha / NZ European

HEARING: Let us know if you wish to speak at a hearing and your preferred location. *

I do NOT wish to speak in support of my submission and ask that the following submission be fully considered.

Feedback

Council has highlighted a number of proposed changes to some of its key projects, please let us know if you agree with these changes.

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Water projects - Do you agree with these changes?

Strongly agree

Do you have any comment to share with us?

Agree with the change ALIGNING ALL OUR LOCAL WATER SCHEMES.

Attached Documents

File

No records to display.

13



First name: Patrick

Last name: Kane

On behalf of:

Self and Kinloch Kindergarten

Age:

65-74

Gender:

Male

Ethnicity:

Pakeha / NZ European

HEARING: Let us know if you wish to speak at a hearing and your preferred location. *

I do NOT wish to speak in support of my submission and ask that the following submission be fully considered.

Feedback

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Read our Consultation document [HERE](#)

Do you agree with these criteria?

Neither agree nor disagree

Do you have any comment to share with us?

Council has highlighted a number of proposed changes to some of its key projects, please let us know if you agree with these changes.

You can read about changes to our capital expenditure programme [HERE](#)

Water projects - Do you agree with these changes?

Neither agree nor disagree

Do you have any comment to share with us?

13

Transport projects – Do you agree with these changes?

Mostly agree

Do you have any comment to share with us?

Kinloch Road alongside The Poplars needs urgent upgrade

Community facilities projects – Do you agree with these changes?

Mostly agree

Do you have any comment to share with us?

Re Kinloch Hall exterior upgrade. Yes it needs doing and please bear in mind

1. for its part time use as a kindergarten there are certain safety criteria that need to be met. These are currently met but any improvements must not compromise these.

2. In my business we heat many community and school halls and the Kinloch hall has proven to be out on its own in terms of heat loss - it's huge - of course due to so much glass and lack of insulation. One big improvement that could be made is under floor insulation. In data logging we did early one morning the temperature beneath the hall (with heater having been on for a couple of hours) was up to 8 degrees warmer than the surrounding air - showing massive loss through the floor. Cost has been quoted at about \$2,000 for insulation installed, which would be a very good investment.

Wastewater projects – Do you agree with these changes?

Neither agree nor disagree

Do you have any comment to share with us?

Solid waste projects – Do you agree with these changes?

Neither agree nor disagree

Do you have any comment to share with us?

Investments projects – Do you agree with these changes?

Neither agree nor disagree

Do you have any comment to share with us?

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Overall, do you agree with these changes?

Neither agree nor disagree

13

Do you have any comment to share with us?

We are proposing some changes to our Significance and Engagement policy.

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Overall, do you agree with these changes?

Strongly agree

Do you have any comments to share with us?

We are proposing a slight increase to the Town Centre Taupō Management targeted rate.

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Do you agree with this increase?

Neither agree nor disagree

Do you agree with these criteria?

Neither agree nor disagree

Do you have any comments to share with us?

Attached Documents

File

No records to display.

14



First name: Nirupa
Last name: Wijesundara

Age:
18-24

Gender:
Male

Ethnicity:
Other

HEARING: Let us know if you wish to speak at a hearing and your preferred location. *

I do NOT wish to speak in support of my submission and ask that the following submission be fully considered.

Feedback

In our consultation document, we set out how Council's decision on whether to modify the delivery timeline of a project will be guided by the criteria below.

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3. resource considerations such as the availability of materials, contractors, and appropriately skilled staff

Read our Consultation document [HERE](#)

Do you agree with these criteria?

Mostly disagree
Do you have any comment to share with us?

Council has highlighted a number of proposed changes to some of its key projects, please let us know if you agree with these changes.

You can read about changes to our capital expenditure programme [HERE](#)

Water projects - Do you agree with these changes?

Neither agree nor disagree
Do you have any comment to share with us?

Transport projects – Do you agree with these changes?

Strongly disagree

T24Consult Page 1 of 3

14

Do you have any comment to share with us?

The recent changes to Taupo's main roads have completely congested our roads. For the first time in ten years, Lake Terrace has become impassable during the daytime due to the elimination of a lane in favour of parking. Taupo has never had a parking problem, but council has decided that our two lanes that aid in traffic reduction should be reduced to one lane and converted to parking. The conversion of the traffic lights to a roundabout by the library has left drivers completely befuddled and frustrated, as the previous traffic lights were more than adequate for traffic management. Additionally, the council installed two traffic lights near the Caltex station and Taupo Primary School. These traffic lights are ineffective between the hours of 5pm and 6.30pm and causes the roads to become completely congested with traffic. Traffic lights were unnecessary in these areas, and the residents never requested them.

Community facilities projects – Do you agree with these changes?

Neither agree nor disagree

Do you have any comment to share with us?

Wastewater projects – Do you agree with these changes?

Neither agree nor disagree

Do you have any comment to share with us?

Solid waste projects – Do you agree with these changes?

Neither agree nor disagree

Do you have any comment to share with us?

Investments projects – Do you agree with these changes?

Neither agree nor disagree

Do you have any comment to share with us?

Council has updated some of its fees and charges and made some changes to how they are structured.

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Overall, do you agree with these changes?

Strongly disagree

Do you have any comment to share with us?

Taupo district council has squandered and defrauded ratepayers' money by promising to improve the town but instead has improved its offices, fleets, and employee benefits. On the other hand, ratepayers have been left with no improvements to the town, but have been duped into paying for unnecessary road improvements that actually add to the town's congestion.

We are proposing some changes to our Significance and Engagement policy.

14

Council is committed to making informed and sustainable decisions in the best interests of our communities. We want to ensure the decisions we make made reflect the aspirations of tangata whenua, residents, ratepayers, community groups and business. To help us to make the best decisions, we engage with our communities daily using a number of tools. Sometimes, this is simply to provide information, and other times we seek input into our decision-making processes. Read more [HERE](#)

Overall, do you agree with these changes?

Strongly disagree

Do you have any comments to share with us?

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Do you agree with this increase?

Strongly disagree

Do you agree with these criteria?

Mostly disagree

Do you have any comments to share with us?

Attached Documents

File
No records to display.

15



First name: John

Last name: McOviney

On behalf of:

Marine Parade Motuoapa

Age:

75+

Gender:

Male

Ethnicity:

Other

HEARING: Let us know if you wish to speak at a hearing and your preferred location. *

I do NOT wish to speak in support of my submission and ask that the following submission be fully considered.

Feedback

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Read our Consultation document [HERE](#)

Do you agree with these criteria?

Neither agree nor disagree

Do you have any comment to share with us?

Council has highlighted a number of proposed changes to some of its key projects, please let us know if you agree with these changes.

You can read about changes to our capital expenditure programme [HERE](#)

Water projects - Do you agree with these changes?

Neither agree nor disagree

Do you have any comment to share with us?

I have a house in Motuoapa and the sooner the mains pressure system is connected for ALL residents , the better , we are on bore water and it is OK but not totally acceptable..

15

Transport projects – Do you agree with these changes?

Do you have any comment to share with us?

There are far too many changes in road speed , on the open road should be 80 or 100 .

Community facilities projects – Do you agree with these changes?

Do you have any comment to share with us?

I have a house in Motuoapa and the sooner the mains pressure system is connected for ALL residents , the better , we are on bore water and it is OK but not totally acceptable..

Investments projects – Do you agree with these changes?

Do you have any comment to share with us?

The foreshore at Motuoapa is unacceptable , when the lake level is not at the highest level the water quality is putrid. I have talked to the Harbourmaster about this issue and he aware that I have offered financial help but it is always too difficult to get done for either council requirements or EW . the addition of the marina has been wonderful but the foreshore next to the marina needs a major cleanup.

I've been trying to get this done for 20+ years and as typical with Govt at all levels ,its like making the world spin the other way.

Talk to the Harbourmaster for an unbiased opinion he is fully aware of my, and other residents, views.

Its an absolute tragedy that the southern entrance to Taupo has such little consequence to Taupo city and council.

Do you have any other feedback?

This feedback document is quite complex for the average resident to fill out, and I don't expect much to eventuate from my submission.

Attached Documents

File

No records to display.

16



First name: Andy

Last name: Bloomer

Age:

65-74

Gender:

Male

Ethnicity:

Pakeha / NZ European

HEARING: Let us know if you wish to speak at a hearing and your preferred location. *

I do NOT wish to speak in support of my submission and ask that the following submission be fully considered.

Feedback

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Read our Consultation document [HERE](#)

Do you agree with these criteria?

Strongly agree

Do you have any comment to share with us?

Council has highlighted a number of proposed changes to some of its key projects, please let us know if you agree with these changes.

You can read about changes to our capital expenditure programme [HERE](#)

Water projects - Do you agree with these changes?

Strongly agree

Do you have any comment to share with us?

Transport projects – Do you agree with these changes?

Strongly agree

T24Consult Page 1 of 3

16

Do you have any comment to share with us?

Community facilities projects – Do you agree with these changes?

Strongly agree

Do you have any comment to share with us?

Wastewater projects – Do you agree with these changes?

Strongly agree

Do you have any comment to share with us?

Solid waste projects – Do you agree with these changes?

Strongly agree

Do you have any comment to share with us?

Investments projects – Do you agree with these changes?

Neither agree nor disagree

Do you have any comment to share with us?

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Overall, do you agree with these changes?

Strongly agree

Do you have any comment to share with us?

We are proposing some changes to our Significance and Engagement policy.

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Overall, do you agree with these changes?

Neither agree nor disagree

Do you have any comments to share with us?

16

We are proposing a slight increase to the Town Centre Taupō Management targeted rate.

Towncentre Taupō (TCT) is a member-based organisation established to promote the development of Taupō's Central Business District as a safe and vibrant space, while retaining our town's unique identity. All businesses operating within Taupō's town centre are therefore members of TCT by default. Council supports TCT in its work through a dedicated target rate which is paid by TCT members as part of their annual rates.

Read more [HERE](#)

Do you agree with this increase?

Neither agree nor disagree

Do you agree with these criteria?

Neither agree nor disagree

Do you have any comments to share with us?

Attached Documents

File
No records to display.

17



First name: Jacq
Last name: Greening

Age:
45-54

Gender:
Female

Ethnicity:
Pakeha / NZ European

HEARING: Let us know if you wish to speak at a hearing and your preferred location. *

I do NOT wish to speak in support of my submission and ask that the following submission be fully considered.

Feedback

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Read our Consultation document [HERE](#)

Do you agree with these criteria?

Mostly agree
Do you have any comment to share with us?

Council has highlighted a number of proposed changes to some of its key projects, please let us know if you agree with these changes.

You can read about changes to our capital expenditure programme [HERE](#)

Water projects - Do you agree with these changes?

Strongly agree
Do you have any comment to share with us?

Our main interest is in the extension of the water network in Motuoapa. We have been looking into this privately since we purchased our property 4 years ago. Unfortunately it was cost prohibitive. Extending the water mains network to include the properties on the lake side of SH1 is a no brainer to us, especially as it will ensure everyone has safe drinking water and those without bores do not run out of tank water over summer.

T24Consult Page 1 of 3

17

Transport projects – Do you agree with these changes?

Neither agree nor disagree
Do you have any comment to share with us?

Community facilities projects – Do you agree with these changes?

Mostly agree
Do you have any comment to share with us?

Wastewater projects – Do you agree with these changes?

Neither agree nor disagree
Do you have any comment to share with us?

Solid waste projects – Do you agree with these changes?

Neither agree nor disagree
Do you have any comment to share with us?

Investments projects – Do you agree with these changes?

Neither agree nor disagree
Do you have any comment to share with us?

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Overall, do you agree with these changes?

Mostly agree
Do you have any comment to share with us?

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Overall, do you agree with these changes?

T24Consult Page 2 of 3

17

Neither agree nor disagree
Do you have any comments to share with us?

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Do you agree with this increase?

Mostly agree

Attached Documents

File

No records to display.

18



First name: Anna

Last name: McLaren

Age:

35-44

Gender:

Female

Ethnicity:

Pakeha / NZ European

HEARING: Let us know if you wish to speak at a hearing and your preferred location. *

I do NOT wish to speak in support of my submission and ask that the following submission be fully considered.

Feedback

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Do you agree with these criteria?

Mostly agree

Do you have any comment to share with us?

Council has highlighted a number of proposed changes to some of its key projects, please let us know if you agree with these changes.

You can read about changes to our capital expenditure programme [HERE](#)

Water projects - Do you agree with these changes?

Neither agree nor disagree

Do you have any comment to share with us?

Transport projects – Do you agree with these changes?

Mostly agree

T24Consult Page 1 of 3

18

Do you have any comment to share with us?

Would like to see more priority given to the Control Gates bridge access - there is significant development occurring on the Acacia Bay side of the bridge with a huge increase in traffic movement which is only going to increase in the years to come. I would also like to see the Mapara Road footpath extension included - I am unsure why it ends at L'arte, when there is a new subdivision up Highland Drive (along with existing properties) and stairs from the bottom of Dalmore Way with loads of families (and kids walking home from the bus) who walk through the cutting on a daily basis. It is extremely unsafe walking through there currently, especially when cars are coming from both directions.

I would love to see a pedestrian/cycle bridge from Nukuhau (over boat harbour) into Riverside Park to encourage more commuting by foot and bike, providing access from Nukuhau / Acacia Bay into town without having to go via road routes.

Community facilities projects – Do you agree with these changes?

Neither agree nor disagree

Do you have any comment to share with us?

Acacia Bay / Mapara Road / Nukuhau area is in real need of green space and offroad walking tracks. Would love to see priority given to funding the likes of Bike Taupo to develop connecting trails between the Great Lake Trail - Acacia Bay - Taupo town and also more trail connectivity within town to encourage people to get out of their cars and on their bikes.

Riverside Park has to be the most underutilised asset in this district - the natural amphitheatre has to be one of the most stunning settings in NZ and rivals the Bowl of Brooklands in New Plymouth. We have one concert there a year that appeals to one segment of society. Appreciate events haven't been a priority during Covid times, however how about we start to look a little deeper into the breadth of our cultural and events offering - concerts, festivals, special markets around holiday dates, light festivals - the options are endless. The setting and location has the ability to attract thousands from out of town, support our struggling CBD, and increase the vibrancy and cultural offering of our home.

Wastewater projects – Do you agree with these changes?

Neither agree nor disagree

Do you have any comment to share with us?

Solid waste projects – Do you agree with these changes?

Neither agree nor disagree

Do you have any comment to share with us?

Investments projects – Do you agree with these changes?

Mostly disagree

Do you have any comment to share with us?

Are you able to expand on what's included in a 'fit-out'? \$4.9m is an extortionate amount

Council has updated some of its fees and charges and made some changes to how they are structured.

18

We provide a wide range of services and functions to the community that carry costs. Some of these costs are paid for out of general or targeted rates and others are recovered from government. However, where a service or activity benefits an individual customer (e.g., a dog registration benefits an individual dog owner, or a resource consent benefits the individual applicant), Council applies a fee to cover the cost of delivering that service. Read more [HERE](#)

Overall, do you agree with these changes?

Neither agree nor disagree

Do you have any comment to share with us?

We are proposing some changes to our Significance and Engagement policy.

Council is committed to making informed and sustainable decisions in the best interests of our communities. We want to ensure the decisions we make made reflect the aspirations of tangata whenua, residents, ratepayers, community groups and business. To help us to make the best decisions, we engage with our communities daily using a number of tools. Sometimes, this is simply to provide information, and other times we seek input into our decision-making processes. Read more [HERE](#)

Overall, do you agree with these changes?

Neither agree nor disagree

Do you have any comments to share with us?

We are proposing a slight increase to the Town Centre Taupō Management targeted rate.

Towncentre Taupō (TCT) is a member-based organisation established to promote the development of Taupō's Central Business District as a safe and vibrant space, while retaining our town's unique identity. All businesses operating within Taupō's town centre are therefore members of TCT by default. Council supports TCT in its work through a dedicated target rate which is paid by TCT members as part of their annual rates. Read more [HERE](#)

Do you agree with this increase?

Mostly agree

Do you agree with these criteria?

Do you have any comments to share with us?
Which criteria?

Attached Documents

File

No records to display.

19



First name: Thomas

Last name: Brakenrig

Age:

25-34

Gender:

Male

Ethnicity:

Pakeha / NZ European

HEARING: Let us know if you wish to speak at a hearing and your preferred location. *

I do NOT wish to speak in support of my submission and ask that the following submission be fully considered.

Feedback

In our consultation document, we set out how Council's decision on whether to modify the delivery timeline of a project will be guided by the criteria below.

1. the need to maintain a balance across the four pillars of well-being – cultural, environmental, economic, and social
2. prioritisation in line with the eight strategic priorities that we identified and developed as part of the LTP
3. resource considerations such as the availability of materials, contractors, and appropriately skilled staff

Read our Consultation document [HERE](#)

Do you agree with these criteria?

Mostly agree

Do you have any comment to share with us?

Council has highlighted a number of proposed changes to some of its key projects, please let us know if you agree with these changes.

You can read about changes to our capital expenditure programme [HERE](#)

Water projects - Do you agree with these changes?

Strongly agree

Do you have any comment to share with us?

Transport projects – Do you agree with these changes?

Strongly agree

T24Consult Page 1 of 3

19

Do you have any comment to share with us?

Community facilities projects – Do you agree with these changes?

Strongly agree

Do you have any comment to share with us?

For the Town Center Transformation in particular it is worth spending the money now and getting it right the first time. It would be a shame to not make the most of this opportunity.

Wastewater projects – Do you agree with these changes?

Strongly agree

Do you have any comment to share with us?

Solid waste projects – Do you agree with these changes?

Strongly agree

Do you have any comment to share with us?

Investments projects – Do you agree with these changes?

Mostly agree

Do you have any comment to share with us?

Council has updated some of its fees and charges and made some changes to how they are structured.

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Overall, do you agree with these changes?

Mostly agree

Do you have any comment to share with us?

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Overall, do you agree with these changes?

Strongly agree

19

Do you have any comments to share with us?

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Read more [HERE](#)

Do you agree with this increase?

Mostly agree

Attached Documents

File

No records to display.

20



First name: Richard

Last name: Hoadley

On behalf of:

Taupo Marina Ltd

Age:

75+

Gender:

Male

Ethnicity:

Pakeha / NZ European

HEARING: Let us know if you wish to speak at a hearing and your preferred location. *

I do NOT wish to speak in support of my submission and ask that the following submission be fully considered.

Feedback

In our consultation document, we set out how Council's decision on whether to modify the delivery timeline of a project will be guided by the criteria below.

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2. prioritisation in line with the eight strategic priorities that we identified and developed as part of the LTP
3. resource considerations such as the availability of materials, contractors, and appropriately skilled staff

Read our Consultation document [HERE](#)

Do you agree with these criteria?

Neither agree nor disagree

Do you have any comment to share with us?

Council has highlighted a number of proposed changes to some of its key projects, please let us know if you agree with these changes.

You can read about changes to our capital expenditure programme [HERE](#)

Water projects - Do you agree with these changes?

Mostly agree

Do you have any comment to share with us?

20

Transport projects – Do you agree with these changes?

Mostly disagree

Do you have any comment to share with us?

Refer to my attached submission

Community facilities projects – Do you agree with these changes?

Neither agree nor disagree

Do you have any comment to share with us?

Wastewater projects – Do you agree with these changes?

Mostly agree

Do you have any comment to share with us?

Solid waste projects – Do you agree with these changes?

Mostly agree

Do you have any comment to share with us?

Investments projects – Do you agree with these changes?

Mostly disagree

Do you have any comment to share with us?

Council has updated some of its fees and charges and made some changes to how they are structured.

We provide a wide range of services and functions to the community that carry costs. Some of these costs are paid for out of general or targeted rates and others are recovered from government. However, where a service or activity benefits an individual customer (e.g., a dog registration benefits an individual dog owner, or a resource consent benefits the individual applicant), Council applies a fee to cover the cost of delivering that service. Read more [HERE](#)

Overall, do you agree with these changes?

Neither agree nor disagree

Do you have any comment to share with us?

We are proposing some changes to our Significance and Engagement policy.

Council is committed to making informed and sustainable decisions in the best interests of our communities. We want to ensure the decisions we make made reflect the aspirations of tangata whenua, residents, ratepayers, community groups and business. To help us to make the best decisions, we engage with our communities daily using a number of tools. Sometimes, this is simply to provide information, and other times we seek input into our decision-making processes. Read more [HERE](#)

Overall, do you agree with these changes?

T24Consult Page 2 of 3

20

Strongly disagree

Do you have any comments to share with us?

Councillors has failed to communicate with the public in the past and there is no appetite for the Councillors to change that position.

Councillors are failing to keep in touch with the voting public, the ones that voted them to the table.

You talk of 'tools' This is the sort of costly spin that gets nowhere and is just a bad PR exercise with no outcome.

You are also insulting Maori by giving them preference treatment, committee status and special time to express views that they are well capable of doing, just like all other voters who pay rates. Many maori do not even pay rates? Look at the delays that are occurring due to the inability of the new committees being unable to agree resolutions? That is the message that the real world are getting, right or wrong.

We are proposing a slight increase to the Town Centre Taupō Management targeted rate.

Towncentre Taupō (TCT) is a member-based organisation established to promote the development of Taupō's Central Business District as a safe and vibrant space, while retaining our town's unique identity. All businesses operating within Taupō's town centre are therefore members of TCT by default. Council supports TCT in its work through a dedicated target rate which is paid by TCT members as part of their annual rates.

Read more [HERE](#)

Do you agree with this increase?

Strongly agree

Do you agree with these criteria?

Mostly agree

Do you have any comments to share with us?

Landlords in the CBD should also be targeted as they are also on the benefit list of what the TCT members are doing.

Do you have any other feedback?

Refer to the attached submission.

Attached Documents

File

TDC - Annual Plan - Transport 2022 - Hoadley

Submission to Taupo District Council

TDC Annual Plan 2022-23

From Taupo Marina Ltd., 36 Stanley St, Taupo 3330. Phone 07 3768939

Submission:

1. The Wharewaka Point Reserve needs to be prioritised as a strategic asset.
This is a major public reserves and it needs to be identified as an asset that better reflects the way in which it must be considered to respond to changing needs.
Recent work on the walkway is a start, but the roadways still need money allocated for repairs and improvements.

Plus more native planting would help the environment on lake side.

2. A new project for the Transport team is to assist with the proposed improvements to the SH1 roadway between Taupo and Turangi.

The partnership with Waikato Regional Council and the New Zealand Transport Agency (NZTA) needs to be expanded so as to focus on helping the investigative work to be actioned and a plan agreed for implementation.

This work will help with the objective and focus on road safety and future economic development.

This project needs to be included in the Long-term Plan 2021-31. Along with the shortfall of \$2.7 million indicated for planned works.

3. The need for more cycle pathways must be delayed.
I support the fact that there are no new projects for more new pathways.
4. The need for a second bridge over the Waikato River must not be forgotten. The \$300,000 allowed for the new project has my support.
Investigations and planning can be done with existing staff and I am sure there is the will to get this project started.

The decision to install traffic lights on Spa Road has been premature as it was to be a part of the new bridge option. Not as part of the CBD transformation and new 'by-pass' route, north to south.
If it was good enough to get the lights installed TDC now needs to follow up with the new bridge investigation work. Using TDC staff.
5. The Lake Terrace Reserve has not been included within the boundary of the CBD and the area of the TCT. As noted on page 35 of the Consultation document.

That supports my submission that there must be no commercial operations on the Lake Terrace

Reserve, now or in the future.

6. The consultation document does not include a budget in the Solid Waste Operation brief for the so called 'significant cost' of carbon units. There are just two deferred (\$6.2 million) projects that are 'not required' in this Annual Plan.

As there is no budget listed as a new project for 'carbon' then I assume TDC will not be expending any money for carbon units, at some \$75 each.

The Mayor has been reported as saying on 14 March,
"Based on the current plan, the projected average rates rise for 2022/2023 is around 8.35%, with a proportion of this due to increasing government costs and regulations, like the requirement to purchase carbon units which have doubled in price in the past 12 months under the Emissions Trading Scheme."

Why then is this Budget not identified in the Consultation Document?

What has TDC done to mitigate the need to buy carbon credits?

Has TDC looked at possible removal activities, such as the permanent planting of forests to act as carbon sinks?

Has TDC valued the existing stock of planting on Council owned lands.

I do not support payment by TDC for any carbon units on the basis that there is no information in the Annual Plan and that the whole scheme will fail. All the legislation passed by the Labour Government will not survive past 2023.

I also do not support an increase in the rates for this proposed cost of 'carbon credits'.

Summary.

- The Wharewaka Point Reserve needs to be prioritised as a strategic asset.
- Staff at TDC must assist WRC with the proposed improvements to the SH1 roadway between Taupo and Turangi.
- The \$300,000 allowed for the new river crossing bridge project has my support.
- More new cycle ways are not needed.
- The boundary of the TCT /CBD does not need to include the Lake Terrace Reserve.
- I do not support payment by TDC for any carbon units on the basis that there is no information in the Annual Plan.
- I do not support an increase in the rates for this proposed cost of 'carbon credits'.

Thank you for reading this submission.

Richard Hoadley
5 April 2022

20

Please click on the link below to view the document

https://submissions.taupo.govt.nz:443/Manage/Docs/PID_64/64_3987_9B442Q_TDC - Annual Plan - Transport 2022 - Hoadley.doc

21

**Organisation:**

Taupo Racing Club Inc

First name: Terry**Last name:** Campbell**Age:****Gender:****Ethnicity:****HEARING: Let us know if you wish to speak at a hearing and your preferred location. ***

I do NOT wish to speak in support of my submission and ask that the following submission be fully considered.

Feedback

In our consultation document, we set out how Council's decision on whether to modify the delivery timeline of a project will be guided by the criteria below.

1. the need to maintain a balance across the four pillars of well-being – cultural, environmental, economic, and social
2. prioritisation in line with the eight strategic priorities that we identified and developed as part of the LTP
3. resource considerations such as the availability of materials, contractors, and appropriately skilled staff

Read our Consultation document [HERE](#)

Do you agree with these criteria?

Do you have any comment to share with us?

Council has highlighted a number of proposed changes to some of its key projects, please let us know if you agree with these changes.

You can read about changes to our capital expenditure programme [HERE](#)

Water projects - Do you agree with these changes?

Do you have any comment to share with us?

The Taupo Racing Club (Inc) respectfully ask for the support of the Taupo District Council to assist in the completion of our current irrigation project and access to Town Supply Water

INFRASTRUCTURE REQUEST

- a) Completion of automated irrigation project \$70,000 +GST

T24Consult Page 1 of 2

21

- b) Connection to Town Water Supply
- connection fee \$2,000
- Headworks contribution \$13,272

Attached Documents

File
PDF - Taupo Racing Club Submission

Taupo Racing Club Inc.

Secretary: Marion Thompson PO Box 9, Taupo 3351,
Mobile: 021 749 179 Email: marion@racingtaupo.co.nz
Racecourse Ph: (07) 378 6248
President: Terry Campbell
Mobile: 0274 428 258 Email: terry@racingtaupo.co.nz

14th March 2022

**Chief Executive Officer
Taupo District Council
ggreen@taupo.govt.nz**

Dear Gareth,

TAUPO RACING CLUB INFRASTRUCTURE

At last evenings committee meeting it was resolved that we put in an application to support new infrastructure developments at our Centennial Park Site.

The club has undergone a large transformation in the last 5 years and is being well supported at a national and regional level.

The Messara Report on racing stated that because of Taupo's central position and excellent racing surface, the club was to be a long-term partner in the NZ Racing scene.

Over the last 7 years the club has:

- a. Built new tower for commentators and TV presentations \$170,000*
- b. Built 42 new stalls \$60,000*
- c. Upgraded 65 old stalls \$40,000*
- d. Invested in new plastic safety rail \$80,000*
- e. Re cambered the 600m to 800m bend on the track \$60,000*
- f. Re painted all the railings on the property \$15,000.*
- g. Replaced all seating on the two stands \$12,500*

IRRIGATION

With improved water facilities the New Zealand Thoroughbred Racing has increased our race days from 4 to 7.

Irrigation will enable the better use and maintenance of the track

Our latest project is to lift the standard of racing with the addition to the facilities of an automatic irrigation system. The total cost is \$200,000 + GST of which the club so far has paid approx. \$130,000 + GST. We are looking for \$70,000 + GST to complete a fully automated system which will include upgrading our supply with a new bore. The club's national profile is rising and we wish to continue this trend. We have incredible support from the local community who are very pleased with our progress.

Our other infrastructure request is to enable our connection to town supply water

Taupo Racing Club Inc.

Secretary: Marion Thompson PO Box 9, Taupo 3351,
 Mobile: 021 749 179 Email: marion@racingtaupo.co.nz
 Racecourse Ph: (07) 378 6248
 President: Terry Campbell
 Mobile: 0274 428 258 Email: terry@racingtaupo.co.nz

which is being provided by Contact Energy in Centennial Drive.

PUBLICITY

Racing is the only local sport to receive live broadcasting throughout NZ, Australia and Asian centres such as Singapore, Hong Kong and Japan.

We have been utilising the #LOVE TAUPO sign at all our meetings to promote the Taupo District on live television.

The club was rated the second-best Community Club in NZ for the 2 last year's at the NZTR Conference

Other projects that we are looking at are:

- *Improving the road frontage, new fencing.*
- *Planting the embankment at the Southern end of the track to improve TV viewing.*
- *Developing a member's facility that can be used for public functions.*
- *Painting all buildings.*

We appreciate the TDC assistance with the roading shared by the Car Club, Model Flyers and the Racing Club in the past. It has lifted the standard of the property.

The Taupo Racing Club (Inc) respectfully ask for the support of the Taupo District Council to assist in the completion of our current irrigation project and access to Town Supply Water

INFRASTRUCTURE REQUEST

a) Completion of automated irrigation project	\$70,000 +GST
b) Connection to Town Water Supply	
-connection fee	\$2,000
- Headworks contribution	\$13,272

We are happy to meet and discuss this at any time.

Kind Regards,

Terry Campbell

President,

Taupo Racing Club (Inc)

Taupo Racing Club Inc.

Secretary: Marion Thompson PO Box 9, Taupo 3351,
Mobile: 021 749 179 Email: marion@racingtaupo.co.nz
Racecourse Ph: (07) 378 6248
President: Terry Campbell
Mobile: 0274 428 258 Email: terry@racingtaupo.co.nz

22

**Organisation:**

Kinloch Community Association

First name: Rachel**Last name:** Stock**Age:****Gender:****Ethnicity:****HEARING: Let us know if you wish to speak at a hearing and your preferred location. ***

I do NOT wish to speak in support of my submission and ask that the following submission be fully considered.

Feedback

Council has highlighted a number of proposed changes to some of its key projects, please let us know if you agree with these changes.

You can read about changes to our capital expenditure programme [HERE](#)

Water projects - Do you agree with these changes?

Do you have any comment to share with us?

We note that the Council is having to review cost estimates for the water schemes across the district because of the Taupo Pumice soils and the added reinforcement required. This seems hard to reconcile given that Taupo pumice soils have been present for ever and should have been known.

The KCA supports aligning all our local water schemes. We support removing the Five Mile Bay additional water rate and applying a district wide rate of \$0.50 per ratepayer.

Key Projects (Water)

We support the Kinloch drinking water standards upgrade during the years 2021-23 continuing and note the increased allocation of \$4.6 million.

The KCA raises concern that the Council has had to postpone the Construction of the new water reservoir in Kinloch – deferred

Our village is growing quickly, and Council continues to issue development approval which will see greatly expanded demand. We formally raise the issue of quantum of storage for these peak demand periods and the Council's ability to meet that demand. We request that the new reservoir being given priority for completion in the 2023-24 annual plan.

22

Transport projects – Do you agree with these changes?

Do you have any comment to share with us?

The KCA support Whangamata Road and Poihipi road upgrades as planned.

We submit that Council needs to add a new project being Kinloch Rd to roading upgrade as it is in rapidly declining condition and is as significant hazard particularly in wet weather.

The KCA supports bringing forward the Waikato River Bridge crossing investigation.

Attached Documents

File
PDF - KCA Annual Plan Submission

Kinloch Community Association
PO Box 879
Taupo
New Zealand 3330
kinlochcommunity@gmail.com
www.kinloch.org.nz



Kinloch Community Association (KCA) submission on:
Taupo District Council Annual Plan 2022-23

Water

We note that the Council is having to review cost estimates for the water schemes across the district because of the Taupo Pumice soils and the added reinforcement required. This seems hard to reconcile given that Taupo pumice soils have been present for ever and should have been known.

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Transport

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We submit that Council needs to add a new project being Kinloch Rd to roading upgrade as it is in rapidly declining condition and is as significant hazard particularly in wet weather.

The KCA supports bringing forward the Waikato River Bridge crossing investigation.

23



First name: Phil

Last name: Shields

On behalf of:

myself

Age:

65-74

Gender:

Male

Ethnicity:

Pakeha / NZ European

HEARING: Let us know if you wish to speak at a hearing and your preferred location. *

I do NOT wish to speak in support of my submission and ask that the following submission be fully considered.

Feedback

In our consultation document, we set out how Council's decision on whether to modify the delivery timeline of a project will be guided by the criteria below.

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2. prioritisation in line with the eight strategic priorities that we identified and developed as part of the LTP
3. resource considerations such as the availability of materials, contractors, and appropriately skilled staff

Read our Consultation document [HERE](#)

Do you agree with these criteria?

Mostly agree

Do you have any comment to share with us?

Council has highlighted a number of proposed changes to some of its key projects, please let us know if you agree with these changes.

You can read about changes to our capital expenditure programme [HERE](#)

Water projects - Do you agree with these changes?

Strongly disagree

Do you have any comment to share with us?

Clearly in your section Water _ What we do and why we do it, you indicate that Taupo District Council has already accepted the Three Waters proposal put forward by the government. This is because of your

T24Consult Page 1 of 2

23

statement " Funding to complete the projects will be met through external borrowing and responsibility for the debts will be transferred to the new Three Waters Entity upon its creation"

Where is your mandate to allow this to happen? When are you going to ask your ratepayers, by way of a referendum, if this is what they want? I can assure you that there is a strong objection to the Three Waters and ratepayers deserve to be consulted properly and their opinions listened to. These are our assets!

With reference to the substantial increase in costs for 5 water projects, namely Centennial, Hatepe, Kinloch, Motuoapa, Omori, the cost of these projects has increased by \$18.8m from an original estimate of \$16.4m to a new estimate of \$35.2m SERIOUSLY!! You need to come clean and explain in detail why these costs have doubled? To say they are higher due to the ongoing economic environment (by which i assume you mean Inflation?) would increase costs by about 7% OR \$1.15m. This leaves the rest of the cost increase at \$17.65m and this you explain away as being due to the nature of Taupo's pumice soils requiring added reinforcement to the infrastructure! Pumice soils have been around Taupo longer than any of you have - so how can this have been a surprise to anyone?

This is Ratepayers money you are talking about and someone needs to be held accountable for this significant cost blow out!

Do you have any other feedback?

Yes I do. You say that for 2022/23 you are proposing to align our water rates across our communities. Surely this has already happened? - the reason I say this is because my rates increased substantially last year. My rates went from \$2775.15 to \$3214.18 an increase of 15.8%. Whilst I appreciate rates did not go up the previous year due to Covid you have just clawed this back the next year! When I queried what I thought was an excessive increase I was told that this was because water rates were being aligned across communities. The water component of my rates bill went from \$346.94 to \$536.46 an increase of \$189.52 OR 54.6% increase!!

Yet all you say about this is the cost to incorporate the targeted Five Mile Bay water rate across the whole district will be an added 50 cents for each ratepayer!

Please answer one question in respect of this excessive water rate increase and the blow out of costs on water projects - Are you acting as a government agent and just implementing the Three Waters Agenda?

Ratepayers deserve to be treated better than this - clearly you have some explaining to do?

Attached Documents

File
No records to display.

24



First name: Stephen

Last name: sanderson

Age:

65-74

Gender:

Male

Ethnicity:

Pakeha / NZ European

HEARING: Let us know if you wish to speak at a hearing and your preferred location. *

Yes

Turangi

Additional requirements for hearing:

Feedback

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2. prioritisation in line with the eight strategic priorities that we identified and developed as part of the LTP
3. resource considerations such as the availability of materials, contractors, and appropriately skilled staff

Read our Consultation document [HERE](#)

Do you agree with these criteria?

Mostly agree

Do you have any comment to share with us?

I agree with one & two

I believe that Council is too reliant on consultants and outside contractors. Staff are not qualified to supervise the contractors.

Council has highlighted a number of proposed changes to some of its key projects, please let us know if you agree with these changes.

T24Consult Page 1 of 4

24

You can read about changes to our capital expenditure programme [HERE](#)

Water projects - Do you agree with these changes?

Mostly disagree

Do you have any comment to share with us?

UV Plants for Atiamuri, Whareroa, Waihaha and Tirohanga 2022-2024 - 4 million. How do you explain a funding "shortfall"? Is it a short fall in overall costs for these projects or is it that they weren't originally planned and forgotten about making them ineligible for govt funding the total cost? if so, how did this happen?

Transport projects – Do you agree with these changes?

Neither agree nor disagree

Do you have any comment to share with us?

Community facilities projects – Do you agree with these changes?

Mostly agree

Do you have any comment to share with us?

Wastewater projects – Do you agree with these changes?

I don't know

Do you have any comment to share with us?

Solid waste projects – Do you agree with these changes?

Strongly disagree

Do you have any comment to share with us?

You yourselves have stated in the plan that there would be a 7.35% increase in rates with a likely hood of a further 1% increase, while the plan states it is largely due to solid waste surely not all of it is a result of those costs. What other activities are we currently engaged in to reduce our carbon footprint other than buying carbon credits? What about general inflation or are you planning to reduce services further to meet the cost of inflation?

Investments projects – Do you agree with these changes?

Mostly agree

Do you have any comment to share with us?

No comments to make.

Council has updated some of its fees and charges and made some changes to how they are structured.

We provide a wide range of services and functions to the community that carry costs. Some of these costs are paid for out of general or targeted rates and others are recovered from government. However, where a service or activity benefits an individual customer (e.g., a dog registration benefits an individual dog owner,

T24Consult Page 2 of 4

24

or a resource consent benefits the individual applicant), Council applies a fee to cover the cost of delivering that service. Read more [HERE](#)

Overall, do you agree with these changes?

Neither agree nor disagree
Do you have any comment to share with us?

We are proposing some changes to our Significance and Engagement policy.

Council is committed to making informed and sustainable decisions in the best interests of our communities. We want to ensure the decisions we make made reflect the aspirations of tangata whenua, residents, ratepayers, community groups and business. To help us to make the best decisions, we engage with our communities daily using a number of tools. Sometimes, this is simply to provide information, and other times we seek input into our decision-making processes. Read more [HERE](#)

Overall, do you agree with these changes?

Mostly agree
Do you have any comments to share with us?
I totally agree with the appointment of Libby O'Brien and Marama Isherwood to liaise with communities in the Southern end of the lake. It is important that they have full support from the Council and authority and influence in taking issues regarding the southern end of the Lake back to Council.

We are proposing a slight increase to the Town Centre Taupō Management targeted rate.

Towncentre Taupō (TCT) is a member-based organisation established to promote the development of Taupō's Central Business District as a safe and vibrant space, while retaining our town's unique identity. All businesses operating within Taupō's town centre are therefore members of TCT by default. Council supports TCT in its work through a dedicated target rate which is paid by TCT members as part of their annual rates. Read more [HERE](#)

Do you agree with this increase?

Neither agree nor disagree

Do you agree with these criteria?

Neither agree nor disagree
Do you have any comments to share with us?

Do you have any other feedback?

Thank you for this opportunity to comment on your annual plan
My first issue is the lack of detail in the plan.

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While I understand the long-term plan signals what is to be done over the next ten years with three-year reviews, the annual plan surely should signal any changes or increases in the costs, for example the Whareroa refuse special rate, water, and sewage rates for the coming year. If there are no changes they still should be noted in the plan for that year. You yourselves have stated in the plan that there would be a 7.35% increase in rates with a likely hood of a further 1% increase, while the plan states it is largely due to solid waste surely not all of it is a result of those costs. What other activities are we currently engaged in to reduce our carbon footprint other than buying carbon credits? What about general inflation or are you planning to reduce services further to meet the cost of inflation?

The average person in the street should be able to read the plan and get a fair idea of what will be done in their community over the next year and what those costs are. I find the annual plan as it is, increasing difficult to understand.

One solution would be to have a single page of what was proposed signaled in the 10-year plan for the year and changes that are proposed and the subsequent effect on rates for the year.

New projects

UV Plants for Atiamuri, Whareroa, Waihaha and Tirohanga 2022-2024 - 4 million. How do you explain a funding "shortfall"? Is it a short fall in overall costs for these projects or is it that they weren't originally planned and forgotten about making them ineligible for govt funding the total cost? if so, how did this happen?

I've just highlighted some of the issues that I have with the plan and a lot of my frustration with Council is purely operational.

Attached Documents

File
No records to display.

25

**Organisation:**

Lakes & Waterways Action Group Trust (LWAG)

First name: Paul**Last name:** White**On behalf of:**

Lakes & Waterways Action Group Trust

Age:**Gender:****Ethnicity:****HEARING:** Let us know if you wish to speak at a hearing and your preferred location. *

Yes

Taupo

Additional requirements for hearing:

Feedback

In our consultation document, we set out how Council's decision on whether to modify the delivery timeline of a project will be guided by the criteria below.

1. the need to maintain a balance across the four pillars of well-being – cultural, environmental, economic, and social
2. prioritisation in line with the eight strategic priorities that we identified and developed as part of the LTP
3. resource considerations such as the availability of materials, contractors, and appropriately skilled staff

Read our Consultation document [HERE](#)

Do you agree with these criteria?

Strongly agree

Do you have any comment to share with us?

Council has highlighted a number of proposed changes to some of its key projects, please let us know if you agree with these changes.

You can read about changes to our capital expenditure programme [HERE](#)

T24Consult Page 1 of 2

25

Water projects - Do you agree with these changes?

Strongly agree

Do you have any comment to share with us?

Support specifically: '2. ALIGNING ALL OUR LOCAL WATER SCHEMES We're aligning all our water schemes to be funded district-wide which means we need to remove the current targeted water rate being paid by Five Mile Bay residents'

LWAG agree that the cost for smaller water scheme improvement should be carried by the district as a whole.

Ref: pg 20 ' costs for completing these projects are now known to be higher than we had anticipated in the Long-term Plan.'

We support: 'Funding to complete these projects will be met through external borrowings and responsibility for the debts will be transferred to the new three waters entity upon its creation.'

Comment: In terms of forward planning and rising infrastructure costs to provide communities with high-quality, safe drinking water meeting the performance requirements of all parts of the DSWNZ, LWAG note that the Government 3 Waters process is working toward addressing this.

On balance we see there will be benefits in having more affordable future planning options for the district when national entities are involved. The proposed public shareholding model with councils owning all the shares in the new Water Services Entities on behalf of their communities is an encouraging signal that the bill will progress with support from councils.

Transport projects – Do you agree with these changes?

Mostly agree

Do you have any comment to share with us?

Wastewater projects – Do you agree with these changes?

Strongly agree

Do you have any comment to share with us?

Solid waste projects – Do you agree with these changes?

Mostly agree

Do you have any comment to share with us?

Attached Documents

File
No records to display.

26



First name: Raewyn

Last name: Beattie

Age:

55-64

Gender:

Female

Ethnicity:

HEARING: Let us know if you wish to speak at a hearing and your preferred location. *

Yes

Additional requirements for hearing:

Feedback

Community facilities projects – Do you agree with these changes?

Do you have any comment to share with us?

As a new resident of Kuratau I have been very grateful to realize the great work that the TDC does with the reserves around our lake edge and bush tracks.

There are 2 areas that I would like to address – we have 2 “free” dog areas – adjacent to the Kuratau Boat Ramp and at the top of Ihaia Road.

At the boat ramp there is a dog poop disposal container and signage. But at Ihaia Road there is neither. It would be great to see this rectified.

Both areas are designated “free” areas but the properties adjacent to these don’t have fences, so this does present problems at times with dogs, rabbits and excitement! was wondering if there was a possibility of a “dog’s only zone” could be established? During my walking of the area, I have noticed that there is an area adjacent to the Croquet lawn that might fit this purpose. A fully enclosed area with a gate so that people can easily let their dogs off in safety. With water stations, poop containers and poop bag dispenser. I am sure there are plenty of options to view around our various councils.

As I have talked with other dog people regarding this, a further idea has come to light. There has been discussion around fitness stations for a number of years. During time spent travelling around the NZ, I have taken note that several areas have dog parks that have agility type equipment. While in Hastings

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last week I was at their free dog park and I witnessed children playing on the equipment and also a youngster biking over and around the set up. His got me to thinking that maybe this could be incorporated around our lake shore.

There could be bench seats – longer that would double as exercise equipment as well as dog training, there could be weaving pole that could also be used for running through and biking through, what about culvert pipes that children and dogs could crawl through that were covered in dirt so that bikes could ride over, ramps that could ridden over as well as dogs to go over? I am sure that there would be further ideas to come from the community. Imagine if there was a track that contained some 6/8 stations every 200m???

I am sure that this could be a great community and council lead initiative which would benefit all that visit our piece of paradise.

Attached Documents

File
No records to display.

27



First name: Nick

Last name: Bradford

Age:

75+

Gender:

Male

Ethnicity:

Pakeha / NZ European

HEARING: Let us know if you wish to speak at a hearing and your preferred location. *

I do NOT wish to speak in support of my submission and ask that the following submission be fully considered.

Feedback

Do you have any other feedback?

Nearly 3 years ago the Council signed up to the Government's Climate Emergency document, and the Mayor said it was important that TDC did all it could to mitigate its effect on the climate and to reduce its carbon footprint. As this is an emergency, at the very least there should be yearly reporting on the TDC's carbon footprint in providing all its services, and what the Council are doing to reduce its output of greenhouse gases.

The latest IPCC report says that to keep the world below 1.5 degrees of warming the world must reduce its greenhouse gas output by 45% by 2030. Scientists have stated that the door to a liveable future is closing fast. Has the Council worked out its carbon footprint and what has been done to materially reduce it?

Attached Documents

File

No records to display.

28

**Organisation:**

Amplify

First name: Rick**Last name:** Keehan**On behalf of:**

Amplify

Age:**Gender:****Ethnicity:****HEARING: Let us know if you wish to speak at a hearing and your preferred location. ***

I do NOT wish to speak in support of my submission and ask that the following submission be fully considered.

Feedback

Community facilities projects – Do you agree with these changes?

Strongly agree

Do you have any comment to share with us?

Taupō Town Centre Transformation Project

Amplify supports the proposed top-up, of \$4 million dollars of council funding to complete the Taupō Town Centre Transformation Project to the standards and full aims of the project. The investment in the central business district is vital for the continued growth and development of the Taupō District and the vitalisation of the Town Centre. This project is fundamental by creating a world-class destination Town Centre and waterfront for our community and visitors. We believe this project must be completed to the highest standard as the changes and outcomes will affect the community and the economic outcomes of the town centre for many years to come.

We are proposing a slight increase to the Town Centre Taupō Management targeted rate.

Towncentre Taupō (TCT) is a member-based organisation established to promote the development of Taupō's Central Business District as a safe and vibrant space, while retaining our town's unique identity. All businesses operating within Taupō's town centre are therefore members of TCT by default. Council supports TCT in its work through a dedicated target rate which is paid by TCT members as part of their annual rates. Read more [HERE](#)

Do you agree with this increase?

28

Strongly agree

Do you have any other feedback?**Town Centre Taupō (TCT) Management Rate**

We believe the Taupō District Council should support and fund the additional funds requested by TCT. Amplify fully supports the work of the Town Centre Taupō organisation to enhance and develop the social and economic wellbeing of the central Taupō business district. TCT support continues to develop a vibrant, contemporary and well-managed town centre for the Taupō District.

Housing Barriers to Economic Development

Housing continues to be a barrier to development in the Taupō district. The housing constraints in the region provide challenges for economic growth. Amplify continues to support the need for a dedicated internal resource to advocate for the Taupo district and address the barriers to housing in the Taupō district.

Support for The Hub Agencies

The collective Hub Agencies all strive for the promotion, growth and development of the Taupō District. The continued support of the Taupō District Council is appreciated and ensures the district's competitive advantage in attracting visitors to the region, developing and securing business growth and building a resilient and skilled workforce.

Attached Documents

File

TDC Annual Plan 2022-23 - Amplify Submission

29 March 2022

Chief Executive Officer
Taupō District Council
Private Bag 2005
Taupō Mail Centre
Taupō 3352
New Zealand

Dear Mr Green,

AMPLIFY'S SUBMISSION TO TAUPŌ DISTRICT COUNCILS ANNUAL PLAN 2022-23

On behalf of the Board of Amplify (Enterprise Great Lake Taupō Trust), we are writing to submit feedback to a number of key points in the Taupō District Council Annual Plan 2022-23.

Amplify is the economic development agency for the Taupō district, and we are charged with growing the local economy. Our strategic objectives are closely aligned with those of the Taupō District Council, in that we wish the Taupō district to be the home of competitive, innovative and sustainable business.

We believe there are significant areas of positive impact that will be realised in the annual plan and we provide feedback and support to a number of proposed items outlined in the Taupō District Council Annual Plan for 2022-23.

Taupō Town Centre Transformation Project

Amplify supports the proposed top-up, of \$4 million dollars of council funding to complete the Taupō Town Centre Transformation Project to the standards and full aims of the project. The investment in the central business district is vital for the continued growth and development of the Taupō District and the vitalisation of the Town Centre. This project is fundamental by creating a world-class destination Town Centre and waterfront for our community and visitors. We believe this project must be completed to the highest standard as the changes and outcomes will affect the community and the economic outcomes of the town centre for many years to come.

Town Centre Taupō (TCT) Management Rate

We believe the Taupō District Council should support and fund the additional funds requested by TCT. Amplify fully supports the work of the Town Centre Taupō organisation to enhance and develop the social and economic wellbeing of the central Taupō business district. TCT support continues to develop a vibrant, contemporary and well-managed town centre for the Taupō District.

Housing Barriers to Economic Development

Housing continues to be a barrier to development in the Taupō district. The housing constraints in the region provide challenges for economic growth. Amplify continues to support the need for a dedicated internal resource to advocate for the Taupo district and address the barriers to housing in the Taupō district.

Support for The Hub Agencies

The collective Hub Agencies all strive for the promotion, growth and development of the Taupō District. The continued support of the Taupō District Council is appreciated and ensures the district's competitive advantage in attracting visitors to the region, developing and securing business growth and building a resilient and skilled workforce.

Kind Regards



Jo Bransgrove
Amplify Chair

29



First name: Sandra

Last name: Greenslade

Age:

65-74

Gender:

Female

Ethnicity:

Pakeha / NZ European

HEARING: Let us know if you wish to speak at a hearing and your preferred location. *

Yes

Taupo

Turangi

Virtual hearing

Additional requirements for hearing:

Feedback

In our consultation document, we set out how Council's decision on whether to modify the delivery timeline of a project will be guided by the criteria below.

1. the need to maintain a balance across the four pillars of well-being – cultural, environmental, economic, and social
2. prioritisation in line with the eight strategic priorities that we identified and developed as part of the LTP
3. resource considerations such as the availability of materials, contractors, and appropriately skilled staff

Read our Consultation document [HERE](#)

Do you agree with these criteria?

Mostly agree

Do you have any comment to share with us?

Council has highlighted a number of proposed changes to some of its key projects, please let us know if you agree with these changes.

T24Consult Page 1 of 5

You can read about changes to our capital expenditure programme [HERE](#)

Water projects - Do you agree with these changes?

Mostly disagree

Do you have any comment to share with us?

WATER

The costs for completing these projects are now known to be higher than we had anticipated in the Long-term Plan. (TDC statement from LTP)

For all the reasons stated in the LTP and more, are why TDC must be part of the government's Three Waters, He PuaPua plan as the load on ratepayers is becoming increasingly unsustainable, as evidenced by the constant over runs and increased costs.

It is good to see that TDC have recognised this and the burden will now fall on taxpayers and not just ratepayers.

TDC need to continue to work with government to ensure a smooth transition of water to the 3 Waters Plan.

Transport projects – Do you agree with these changes?

Strongly disagree

Do you have any comment to share with us?

There is no mention whatsoever of any transport arrangements for the people of Turangi. We are totally isolated 50km from our main shopping centre.

People in the town are finding it increasingly difficult to access Taupo for shopping and often it is not a choice – visits to eye, hearing and other specialist services are only available on a very limited capacity in Turangi - sometimes not even once a month.

A weekly shopping bus, going up and back would be appreciated by many who live in Turangi.

Community facilities projects – Do you agree with these changes?

Neither agree nor disagree

Do you have any comment to share with us?

Turangi Recreation and Events Centre 2021-25 \$15.9 million – hard to believe that this has not yet gone over budget unlike so many other projects on the TDC table.

Town Centre Transformation 2022-23 \$2.4 million (total is \$4.4 million across transport and community facility projects) This project is already being funded \$20.6 million by central government as a shovel-ready project. The additional cost is to enable us to take the opportunity to complete this landmark town centre project to the desired standard.

Sad to see that TDC cannot operate within a budget, even as the government contributed without strings attached, \$20m. “a desired standard” is what every person would like but budgets are budgets for most – not TDC. This should be completed withing the budgetary constraints and

the standard needs to be adjusted as such.

Wastewater projects – Do you agree with these changes?

Do you have any comment to share with us?

As TDC will be moving Wastewater projects into the Three Waters, then projects need to be held until this process is clearer or completed.

Solid waste projects – Do you agree with these changes?

Neither agree nor disagree

Do you have any comment to share with us?

SOLID WASTE

Turangi Transfer Station – Turangi continues to have issues with this contractor run station. Access is always difficult these days into the Green Waste area; the ground is muddy most of the time and where there was once a shop to recycle useful items, it now just appears to be a muddle of dumped stuff, not sorted in any order.

TDC needs to take back ownership of the Transfer Station - known as the Dump. It needs to employ people who have a pride in their work and are happy to help and be involved in keeping Turangi clean and tidy.

TDC need to also consider a targeted rate for the Turangi area and return to the original idea that the dump is free for all Turangi residents and ratepayers, to stop fly tipping and the dumping of rubbish particularly in areas along the Tongariro River.

Investments projects – Do you agree with these changes?

Neither agree nor disagree

Do you have any comment to share with us?

PROJECTS YEAR(S) TOTAL COST COMMENTS ONGOING PROJECTS

Waiora House rebuild 2021-23 \$5.9 million On track as planned.

Very disappointing to see this contract let, whilst these submissions are underway. This is not needed at this time as there is no shortage of space in Taupo and with the new Tuwharetoa Health Charitable Trust building providing premises for many of the agencies, that used the former Waiora House, along with others that were located elsewhere, the question is, who are your tenants going to be?

If you are charging commercial rates, social agencies often struggle with this, as their funding should be directed to their work.

Good to see the agreement that TDC has reached over the TDC Offices and a sensible, workable solution that saves ratepayers a very large sum.

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Council has updated some of its fees and charges and made some changes to how they are structured.

We provide a wide range of services and functions to the community that carry costs. Some of these costs are paid for out of general or targeted rates and others are recovered from government. However, where a service or activity benefits an individual customer (e.g., a dog registration benefits an individual dog owner, or a resource consent benefits the individual applicant), Council applies a fee to cover the cost of delivering that service. Read more [HERE](#)

Overall, do you agree with these changes?

Neither agree nor disagree
Do you have any comment to share with us?

Fees should be adjusted annually in line with the cost of living increases.

We are proposing some changes to our Significance and Engagement policy.

Council is committed to making informed and sustainable decisions in the best interests of our communities. We want to ensure the decisions we make made reflect the aspirations of tangata whenua, residents, ratepayers, community groups and business. To help us to make the best decisions, we engage with our communities daily using a number of tools. Sometimes, this is simply to provide information, and other times we seek input into our decision-making processes. Read more [HERE](#)

Overall, do you agree with these changes?

Mostly agree
Do you have any comments to share with us?

We are proposing a slight increase to the Town Centre Taupō Management targeted rate.

Towncentre Taupō (TCT) is a member-based organisation established to promote the development of Taupō's Central Business District as a safe and vibrant space, while retaining our town's unique identity. All businesses operating within Taupō's town centre are therefore members of TCT by default. Council supports TCT in its work through a dedicated target rate which is paid by TCT members as part of their annual rates. Read more [HERE](#)

Do you agree with this increase?

Mostly agree

Do you agree with these criteria?

Mostly agree
Do you have any comments to share with us?

TOWNCENTRE TAUPŌ MANAGEMENT RATE INCREASE Towncentre Taupō (TCT) is a member-based organisation established to promote the development of Taupō's Central Business District as a safe and vibrant space, while retaining our town's unique identity. All businesses operating within Taupō's town

29

centre are therefore members of TCT by default. Council supports TCT in its work through a dedicated target rate which is paid by TCT members as part of their annual rates

This excellent idea which allows the Taupo Towncentre to look beautiful and thrive should be extended to the Turangi Town Centre to all owners and occupiers of shops there. At present there appears to be no ownership of beautifying the area other than through TDC, and its ratepayers. The responsibility should be on those who benefit – the owners and occupiers of the Turangi Town Centre premises, which in turn will benefit the Turangi district as a whole. But we need to get it underway now and clearly under present legislation TDC have the mandate to do this in Turangi - and they should.

Do you have any other feedback?

Each year I advocate for the children of Turangi - and again I urge those in power to listen to their silent voices:

The Turtle Pools in Turangi should be **FREE** to all school age children, particularly in view of the fact that there will now be a play area nearby that will attract children and their families to the area. The children will need to be supervised by an adult (someone over the age of 16yrs) and if that person is not swimming, there will be no charge.

As TDC defines an adult in its charges as anyone over the age of 16 yrs. Council staff should have no difficulty in identifying a “child”. There should be no discrimination – this applies to all children wanting to swim in the Turtle Pools, whether they live in the district or not.

Turangi children have limited access to Lake Taupo, unlike Taupo based children and the Tongariro River, while being a popular haunt of children during the summer months, is not suitable for all school age children – mostly only older children swim there.

Attached Documents

File
No records to display.

30



Organisation:

Bike Taupo

First name: Rowan

Last name: Sapsford

On behalf of:

Bike Taupō Advocacy Group
Incorporated

Age:

Gender:

Ethnicity:

HEARING: Let us know if you wish to speak at a hearing and your preferred location. *

Yes

Additional requirements for hearing:

Attached Documents

File
2022 Annual Plan Submission

30



PO Box 1850
TAUPŌ 3351

bike@bikeTaupō.org.nz
Pete Masters (Chairman) +64 (27) 497 7832
Melissa Johnson (Administrator) +64 (27) 280 4005

13 April 2022

BIKE TAUPŌ SUBMISSION TO THE TAUPŌ DISTRICT ANNUAL PLAN 202-2023

Please find attached a submission from Bike Taupō on the Long Term Plan

Please note that we are more than happy to present our comments in person and discuss them with Taupō District Council Councillors and Staff.

Yours Sincerely

Peter Masters (MNZM)

Bike Taupō Chairman



PO Box 1850
TAUPŌ 3351

bike@bikeTaupō.org.nz
Pete Masters (Chairman) +64 (27) 497 7832
Melissa Johnson (Administrator) +64 (27) 280 4005

Full Name of Party : Bike Taupō Advocacy Group (inc)
Contact Person : Rowan Sapsford
Contact email : rowan@bikeTaupō.org.nz
Full Postal Address : PO Box 1850, Taupō 3351
Phone Number : 021 744 957
Date : April 13, 2022
No. of Pages : Four (including the covering letter)

BIKE TAUPŌ SUBMISSION TO THE TAUPŌ DISTRICT ANNUAL PLAN 2022-2023

Introduction:

Bike Taupō is a cycle advocacy group which provides the Taupō community with a voice for cycling. The organisation was formalised in 2002 and currently has over 3,500 registered members.

To date Bike Taupō has helped create a cycling culture within the district through constructing and maintaining over 200km off road tracks, partaking in continuous dialogue with regulatory authorities; promoting cycling and cycle safety and playing an active part in Taupō's growing cycling community.

Cycling is an important part of the Taupō economy. Bike Taupō alone has an asset base worth approximately \$4 million dollars, making Bike Taupō a significant investor in the local community.

In addition, Bike Taupō is also very concerned about the safety of cyclists in the Taupō District especially those members of our community who currently or could cycle in our urban areas. If Taupō gets a reputation as an unsafe place to ride it could result in significant economic impacts, not to mention the actual physical harm to residents and visitors.

Taupō is now an internationally recognised riding destination. In 2012, Taupō received silver level Ride Centre status from the International Mountain Bike Association. Taupō is one of only five silver level ride centres globally and the only one in the Southern hemisphere.

We believe that biking is a very important part of Taupō. As well as providing health and recreation benefits it is also responsible for numerous jobs (we have seven bike shops in Taupō



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bike@bikeTaupo.org.nz
Pete Masters (Chairman) +64 (27) 497 7832
Melissa Johnson (Administrator) +64 (27) 280 4005

and one in Turangi!!!), environmental initiatives and significant visitor spend. Now more than ever biking is very popular. During and after the 2020 and 2021 lockdowns, more and more individuals, and whanau, young and old are riding bikes. The upgrades to the lakefront pathway in Taupō are testament to the volume of people out and about on bikes. The counters on our trails have also shown a steady increase in people out riding since 2020. The trails and infrastructure that is provided by BT is important to the mental and physical wellbeing of those who use them.

Biking is a strength of our district and should be celebrated and invested in.

1. Bike Taupō Funding

Bike Taupō seeks a continuation of its annual funding that it receives from Taupō District Council on an annual basis. Currently the funding we receive goes towards trail maintenance, trail development, Kids Bike Taupō and administration. The social, economic and environmental benefits from this funding to the Taupō district are considerable.

2. Transport

Bike Taupō supports the proposed investment on the Districts transport infrastructure. Bike Taupō supports the Councils commitment to consider multi modal transport options including the provision for people on bikes.

Bike Taupō supports those projects and investigations which will result in a safer environment for people on bikes, especially locals. Safer places for people to ride their bikes will mean that more people will choose to ride their bikes rather than jump in a car. This will mean a healthier community and more environmental benefits, including reducing green house gas emissions.

Specifically, we support the following:

- Widening Whangamata, Poihipi, Tirohanga and Broadlands roads which will create a safer environment for the many cyclists who use those roads.
- The continued work on the Town Centre Transformation project which has incorporated safe cycling initiatives.
- Waikato River bridge crossing investigations and the consideration of how to enable safe use of this area by people on bikes. We understand that this project will also consider safe biking flows around this area on both sides of the Control Gates Bridge. This area is a key connection between communities who live on the northern side of the Waikato Awa with Taupo town. Options that will make it easier and safer to ride a bike through this area will help to reduce the growing traffic congestion in this area. creating



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TAUPŌ 3351

bike@bikeTaupō.org.nz
Pete Masters (Chairman) +64 (27) 497 7832
Melissa Johnson (Administrator) +64 (27) 280 4005

more effective and safer connections to the town centre will support the recent investment and upgrades in the town centre.

- Huka Falls foot path Stage 3 which will strengthen off road connections between Taupō town, Huka Falls and the Hub.

In addition, Bike Taupō supports initiatives to make key transport corridors and locations safer for people on bikes. This includes areas around schools in the District and Acacia Bay Road to Spa Road.

All of these projects will support Taupō as being a authentic ride destination and also make it safer for more and more locals and visitors to adopt a healthier and more environmentally friendly form of transport.

31



First name: Laurie

Last name: Burdett

Age:

75+

Gender:

Female

Ethnicity:

Pakeha / NZ European

HEARING: Let us know if you wish to speak at a hearing and your preferred location. *

Yes

Taupo

Additional requirements for hearing:

Feedback

In our consultation document, we set out how Council's decision on whether to modify the delivery timeline of a project will be guided by the criteria below.

1. the need to maintain a balance across the four pillars of well-being – cultural, environmental, economic, and social
2. prioritisation in line with the eight strategic priorities that we identified and developed as part of the LTP
3. resource considerations such as the availability of materials, contractors, and appropriately skilled staff

Read our Consultation document [HERE](#)

Do you agree with these criteria?

Mostly disagree

Do you have any comment to share with us?

In many instances there is no balance between the environmental values and the economic ones.

Economic benefit at the expense of the environment without meaningful mitigation is not a balance. The environment loses and I think we should be honest about this.

Council has highlighted a number of proposed changes to some of its key projects, please let us know if you agree with these changes.

You can read about changes to our capital expenditure programme [HERE](#)

T24Consult Page 1 of 4

31

Water projects - Do you agree with these changes?

Mostly agree

Do you have any comment to share with us?

I note in the media that Taupo District Councilors were initially in favour of the the three waters proposal. As public opposition to the proposal grew the council opinion seemed to also change. So where does the council sit now?

Transport projects – Do you agree with these changes?

Mostly agree

Do you have any comment to share with us?

Community facilities projects – Do you agree with these changes?

Mostly agree

Do you have any comment to share with us?

Wastewater projects – Do you agree with these changes?

Mostly agree

Do you have any comment to share with us?

Solid waste projects – Do you agree with these changes?

Strongly agree

Do you have any comment to share with us?

Investments projects – Do you agree with these changes?

Neither agree nor disagree

Do you have any comment to share with us?

Council has updated some of its fees and charges and made some changes to how they are structured.

We provide a wide range of services and functions to the community that carry costs. Some of these costs are paid for out of general or targeted rates and others are recovered from government. However, where a service or activity benefits an individual customer (e.g., a dog registration benefits an individual dog owner, or a resource consent benefits the individual applicant), Council applies a fee to cover the cost of delivering that service. Read more [HERE](#)

Overall, do you agree with these changes?

Mostly agree

Do you have any comment to share with us?

We are proposing some changes to our Significance and Engagement policy.

31

Council is committed to making informed and sustainable decisions in the best interests of our communities. We want to ensure the decisions we make made reflect the aspirations of tangata whenua, residents, ratepayers, community groups and business. To help us to make the best decisions, we engage with our communities daily using a number of tools. Sometimes, this is simply to provide information, and other times we seek input into our decision-making processes. Read more [HERE](#)

Overall, do you agree with these changes?

Neither agree nor disagree

Do you have any comments to share with us?

We are proposing a slight increase to the Town Centre Taupō Management targeted rate.

Towncentre Taupō (TCT) is a member-based organisation established to promote the development of Taupō's Central Business District as a safe and vibrant space, while retaining our town's unique identity. All businesses operating within Taupō's town centre are therefore members of TCT by default. Council supports TCT in its work through a dedicated target rate which is paid by TCT members as part of their annual rates. Read more [HERE](#)

Do you agree with this increase?

Strongly agree

Do you agree with these criteria?

Neither agree nor disagree

Do you have any comments to share with us?

Do you have any other feedback?

Love the shovel ready projects and the revitalization of the town centre.

I have concern about the increase in the rate as many would find this difficult and the steady increase in homes provides an increasing rating base. Previously we had a so called zero rate increase and I have yet to find anyone in this category. I would consider that nearly all properties within the Taupo District would have increased in value, though some more than others. So in what areas did the rates per property decrease?

I note the funding yet again for the second bridge. I would prefer that this money is spent on alternatives to private car use. If we continue to increase the number of vehicles coming into town we will need a car parking building and all that extra expense.

We are in a climate change emergency and we need to do far more to reduce emissions in the transport sector rather than encouraging more and more vehicle use. However the EV facilities are applauded.

31

Attached Documents

File
No records to display.

32



First name: Duncan

Last name: Campbell

Age:

45-54

Gender:

Male

Ethnicity:

Pakeha / NZ European

HEARING: Let us know if you wish to speak at a hearing and your preferred location. *

I do NOT wish to speak in support of my submission and ask that the following submission be fully considered.

Feedback

In our consultation document, we set out how Council's decision on whether to modify the delivery timeline of a project will be guided by the criteria below.

1. the need to maintain a balance across the four pillars of well-being – cultural, environmental, economic, and social
2. prioritisation in line with the eight strategic priorities that we identified and developed as part of the LTP
3. resource considerations such as the availability of materials, contractors, and appropriately skilled staff

Read our Consultation document [HERE](#)

Do you agree with these criteria?

Neither agree nor disagree

Do you have any comment to share with us?

Council has highlighted a number of proposed changes to some of its key projects, please let us know if you agree with these changes.

You can read about changes to our capital expenditure programme [HERE](#)

Water projects - Do you agree with these changes?

Neither agree nor disagree

Do you have any comment to share with us?

Transport projects – Do you agree with these changes?

Mostly disagree

T24Consult Page 1 of 3

32

Do you have any comment to share with us?

Town transformation project is a nice idea in concept but poorly executed, and was never properly consulted with the public. The new signals in Titiraupenga Street are a wasted opportunity and very likely to be bypassed by traffic anyway.

Community facilities projects – Do you agree with these changes?

Neither agree nor disagree

Do you have any comment to share with us?

Wastewater projects – Do you agree with these changes?

Neither agree nor disagree

Do you have any comment to share with us?

Solid waste projects – Do you agree with these changes?

Neither agree nor disagree

Do you have any comment to share with us?

Investments projects – Do you agree with these changes?

Mostly disagree

Do you have any comment to share with us?

Council has updated some of its fees and charges and made some changes to how they are structured.

We provide a wide range of services and functions to the community that carry costs. Some of these costs are paid for out of general or targeted rates and others are recovered from government. However, where a service or activity benefits an individual customer (e.g., a dog registration benefits an individual dog owner, or a resource consent benefits the individual applicant), Council applies a fee to cover the cost of delivering that service. Read more [HERE](#)

Overall, do you agree with these changes?

Neither agree nor disagree

Do you have any comment to share with us?

We are proposing some changes to our Significance and Engagement policy.

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Overall, do you agree with these changes?

32

Neither agree nor disagree
Do you have any comments to share with us?

We are proposing a slight increase to the Town Centre Taupō Management targeted rate.

Towncentre Taupō (TCT) is a member-based organisation established to promote the development of Taupō's Central Business District as a safe and vibrant space, while retaining our town's unique identity. All businesses operating within Taupō's town centre are therefore members of TCT by default. Council supports TCT in its work through a dedicated target rate which is paid by TCT members as part of their annual rates. Read more [HERE](#)

Do you agree with this increase?

Neither agree nor disagree

Do you agree with these criteria?

Neither agree nor disagree
Do you have any comments to share with us?

What does the proposed 8% rates increase comprise of? TDC have wasted enough money in the past on projects of limited or very dubious merit for me to believe any increase in rates is justifiable. I also hear something about paying for 'emissions'? Where is this breakdown?

Attached Documents

File

No records to display.

33

**Organisation:**

Te Poari Mahi/Te Kotahitanga o Ngati Tuwharetoa

First name: George**Last name:** Asher**On behalf of:**Te Poari Mahi/Te Kotahitanga o Ngati
Tuwharetoa**Age:****Gender:****Ethnicity:****HEARING: Let us know if you wish to speak at a hearing and your preferred location. ***

I do NOT wish to speak in support of my submission and ask that the following submission be fully considered.

Feedback

We are proposing some changes to our Significance and Engagement policy.

Council is committed to making informed and sustainable decisions in the best interests of our communities. We want to ensure the decisions we make made reflect the aspirations of tangata whenua, residents, ratepayers, community groups and business. To help us to make the best decisions, we engage with our communities daily using a number of tools. Sometimes, this is simply to provide information, and other times we seek input into our decision-making processes. Read more [HERE](#)

Overall, do you agree with these changes?

Mostly agree

Do you have any comments to share with us?

1. We agree with the Purpose and Scope of the S&EP (para1-3 and the need to review and revoke the existing policy (para 4). We propose that Council develop a clearer and more comprehensive set of consultation principles. We request that the adopted approach is more understanding of our Ngati Tuwharetoa social and cultural context. In particular we emphasize Manāki Tangata (respect for people, local etiquette/protocols), provision of more relevant & better information, maintain a clear awareness of issues of people within communities (not just from a TDC perspective) and support outcomes that are sought by iwi/hapū and ensure that there is adequate follow up to implement outcomes including monitoring success. We consider that meaningful engagement is not a one-time event, but the growth of a relationship where two or more parties engage in a genuine attempt to understand each other's points of view. It is about the quality of the engagement not the number of engagements whether they are few or many. The most important matter for Maori/iwi is that we do not have resources or unlimited time available to meet - resourcing engagement and respecting the integrity and value of the information inputs is

T24Consult Page 1 of 2

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important.

2. We note that the IAP2 Spectrum of Public Participation is retained as the basic framework for determining levels and forms of engagement during a project cycle, however, there appears to be no changes to the existing wording. It is proposed that Council consider modifying the wording of the Table 2 levels and forms of engagement to accommodate its obligations, duties and commitments in relation to para 22. and any other matters relating to engagement with Maori/Iwi/hapū including Te Kōpu ā Kānapanapa and Te Kaupapa Kaitiaki. We confirm our availability to engage with Council to explain further and assist in these matters.

3. We endorse Council's acknowledgement in respect of its "specific legal requirements with regards to engaging with Maori". We request, however, that Council acknowledge and provide specifically for Ngati Tuwharetoa claims settlement mechanisms as the primary starting platforms when engaging with Ngati Tuwharetoa within its Area of Interest. I refer to the Ngati Tuwharetoa Claims Settlement Act 2018 and The Ngati Tuwharetoa Deed of Settlement 2016, all mechanisms mandated by Ngati Turangitukua under its Claims Settlement and subsequent hapū mandates (MOU, Whakahono a Rohe). We emphasize the unique importance of these mechanisms in respecting the obligations of hapū as kaitiaki at place and the traditional decision-makers over their natural and cultural taonga. In context of the kawa and tikanga of Ngati Tuwharetoa, the Ngati Tuwharetoa settlement mechanisms supersede the significance of any JMAs, MOUs and other high-level agreements that are without endorsed hapū mandates.

4. We endorse the list of list of duties, obligations and commitments in para 22. We specifically endorse the final bullet point of para 22, however, we request that Council expand this provision to include the matters raised in 3. above, and specifically reference Te Kōpu ā Kānapanapa, Te Kaupapa Kaitiaki.

Attached Documents

File
No records to display.

ANNUAL PLAN CONSULTATION ON THE TAUPŌ DISTRICT COUNCIL'S ANNUAL PLAN 2022-23

14 April, 2022

NAME: George Asher

EMAIL CONTACT: geoera@xtra.co.nz

ORGANISATION: TE POARI MAHI/TE KOTAHITANGA O NGĀTI TŪWHARETOA

ADDRESS: 130 Atirau Road, PO Box 315, Tūrangi 3353

THIS SUBMISSION IS SPECIFIC TO THE COUNCIL'S SIGNIFICANCE AND ENGAGEMENT POLICY.

1. This submission is made on behalf of Te Poari Mahi, the advisor to Te Kotahitanga o Ngāti Tūwharetoa (TKNT). TKNT is the mandated Ngāti Tūwharetoa entity whose purpose is to act as the representative of Ngāti Tūwharetoa in dealing with the Crown, local authorities, other iwi and other external agencies.
2. We agree with the general Purpose and Scope of Council (Paras 1-3, Appendix Two) to refine and simplify the Significance and Engagement Policy (S&EP) in order to make it better understood and utilised by its constituent communities.
3. We believe that Council should increase its capacity to be better informed and more understanding of the cultural and social context of Ngāti Tūwharetoa. This is an opportunity that should be reflected in the Council's revised engagement policy and practice.
4. In this regard we propose that Council, as part of its review of its S&EP, develop and adopt a clear and comprehensive set of consultation principles including those outlined within Section 82 of the Local Government Act 2002. We also request that these consultation principles emphasise and provide for the principle of Manaaki Tangata (respect for iwi/hapū and their etiquette/protocols).
5. We note that the IAP2 Spectrum of Public Participation continues to be retained as the basic framework for determining levels and forms of engagement during a project cycle. We note and support, Council's intention to adopt a flexible spectrum approach rather than be confined to a binary notion of IAP2. It is not clear, however, how Council is going to modify the wording of the Table 2 levels and forms of engagement. In this regard, we would be available to discuss further with Council, the nature of changes and possible additions to this Table to ensure that consideration is given to developments and mechanisms relating to the Ngāti Tūwharetoa claims settlement redress when changes are being considered. We propose also that when Council considers each set of concerns within its spectrums, it ensures that it is better informed on issues relating to the interests of hapū and the relevant contextual, cultural information.
6. A matter of intense concern for hapū/whānau is that they are provided to attend or respond to multiple meetings in order to impart information or seek relief for issues over a long period of time. Hapū members can ill-afford the time and loss of income that is often a consequence of these engagements. We request that where members of hapū are so engaged, Council have in place a fair and transparent form of reimbursement to reward these persons. In most instances, hapū members will not ask the question.
7. We encourage Council to be aware of and support the vision, objectives and outcomes sought by hapū and whānau and we are aware of the many instances where hapū have received visits from Council and its staff. We applaud this level of engagement. We further encourage Council to ensure that it provides adequate and transparent follow up on progressing outcomes agreed

at these meetings. We deem it important to ensure quality engagement as the basis for establishing enduring relationships.

ENGAGEMENT WITH MAORI

8. Para 19 references the “specific legal requirements with regards to engaging with Māori, including Joint Management Agreements, Memorandum of Understanding or any other similar high-level agreements” as a starting point when engaging with Māori. We request that Council acknowledge and provide specifically for the mechanisms of engagement that are provided under the Ngāti Tūwharetoa Claims Settlement Act 2018 and Deed of Settlement 2016. Of particular importance are Te Kōpu ā Kānapanapa and Te Kaupapa Kaitiaki and Te Piringa. We confirm our availability to engage with Council to explain further and assist in these matters.
9. In addition, we support the mechanisms of engagement under the Ngāti Turangitukua Claims Settlement (MOU, Whakahono a Rohe).
10. We emphasize the importance of these mechanisms in defining the special relationships of iwi with their ancestral taonga and the unique customary position of hapū as kaitiaki at place and the generational decision-makers over their natural and cultural taonga.
11. The settlement mechanisms cited above, therefore, fulfil a particular requirement for engagement that is meaningful in both cultural context and founded on the kawa and tikanga of Ngāti Tūwharetoa. In this respect they supersede the significance of JMAs, MOUs and similar high-level agreements that are without specific hapū mandates.
12. We confirm our availability to engage with Council to explain further and assist in these matters.
13. We endorse fully the list of list of duties, obligations and commitments in para 22.
14. WE DO NOT WISH TO BE HEARD IN PERSON ON MY SUBMISSION.

George Asher
Te Poari Mahi
Waea: 021 368 566 | Imera: geoera@xtra.co.nz



CAUTION: This email and any attachment(s) contains information that is both confidential and possibly legally privileged. No reader may make any use of its content unless that use is approved by Te Kotahitanga o Ngāti Tūwharetoa in writing. If you are not the intended recipient you are notified that any use, dissemination, distribution or copying of this message or data is prohibited. If you received this email in error, please notify us immediately and erase all copies of the message and attachments. We apologise for the inconvenience; kia ora.

34



Organisation:

Federated Farmers

First name: shaun

Last name: hazelton

On behalf of:

Federated Farmers

Age:

Gender:

Ethnicity:

HEARING: Let us know if you wish to speak at a hearing and your preferred location. *

I do NOT wish to speak in support of my submission and ask that the following submission be fully considered.

Feedback

Do you have any other feedback?

Please refer to our submission for details.

Attached Documents

File
Taupo DC Annual Plan 2022

SUBMISSION



To: Taupo District Council

Submission on: Annual Plan 2022

Date: 14 April 2022

Contact: Colin Guyton – Provincial President Rotorua/Taupo
Federated Farmers of New Zealand

Shaun Hazelton – Policy Advisor
Federated Farmers of New Zealand
m: 0273727330 | e: shazelton@fedfarm.org.nz

Submission to Taupo District Council (Council) on the Annual Plan 2022

OUR SUBMISSION

1. Federated Farmers welcomes the opportunity to submit to council on the Proposed Annual Plan for 2022.
2. Both Council and Ratepayers are facing significant budget constraints due to significant cost increases of labour, materials and inflation onto. We do believe that due to these external factors impacting council that it is time for a no -frills approach to councils planning.
3. Rates are among the top ten operational expenses of a farming business. They are a source of considerable financial pressures for all farmers. Federated Farmers makes submissions on annual and long-term plans to ensure councils exercise fiscal prudence, and consider affordability, fairness and equity issues when recovering rates (to the extent this is possible in land and capital value taxation systems).
4. Councils' proposal consults on a 1 per cent increase to an average 8.35 per cent rates rise when in reality, rural Taupo will be facing well above this due to their capital value .
5. We at large supported your Long-Term Plan along with this year's annual plan. We do however wish to have our say on a few highlighted topics up for consultation which are
 - Transport Update
 - UAGC and General Rate
 - Water Targeted Rate
 - Rural Roading

Fees and Charges

6. We support council placing the costs of Service such as landfill and water service on the users rather than a general rate which many members in the district do not benefit from. We accept the increase of costs to council regarding waste management and therefore agree that costs will increase as such.
7. Engineering servic rate changes are supported by the organisation which will more accurately reflect the skillsets and experience covered under each charge.
8. Federated Farmers also supports the continued recognition of working dogs under Fees and Charges as this recognises the benefit for rural members who do not utilise towns parks and dog facilities as that of non-working dogs.

Water Services

9. Federated Farmers is in support of the proposed changes to the water service rate. A targeted rate fairly targets those which gain benefit from the service and this should be

fairly charged per ratepayer within the targeted area. We would not see it appropriate to fund water service through the general rate and ratepayers who are not connected to the service.

Transport Update

10. We appreciate the work to upgrade and improve some of our key rural roads within the district which will bring benefit to our rural communities using these daily. As funding from this is done via the general rate we expect to receive our investment back into rural roading initiatives which are needed to improve access and road safety for rural Taupo.
11. The shortfalls mentioned in the consultation document are key rural roads which will benefit our members which is why Federated Farmers supports keeping these projects on track funded from the general rate.

UAGC and General Rate

12. Federated Farmers supports the use of the UAGC to its full extent being 30% allocated under the LGA. We see value in fairly allocating the cost of business from council through the UAGC addressing the Burden on higher value land throughout the district. The increase in the UAGC has seen benefit for rural ratepayers who pay a large proportion of the councils' rates through capital value where their benefits are generally less than that of urban ratepayers with lower capital value.
13. As we could see through the LTP rural ratepayers' rates % change increased more than most other rateable properties. The use of more targeted rating systems and an increase in the UAGC will reduce the additional pressure on rural ratepayers who as a whole receive the least benefit from councils' services and activities.
14. Council could shift the funding source of some activities that have equal benefit for all ratepayers from the general rate into the UAGC. For example, currently a number of community facilities such as sportsgrounds (currently funded 90%-100% by the general rate), public toilets (currently funded 100% by the general rate) and district libraries (currently funded 90%-100% by the general rate) are predominately funded by general rates and should be funded by UAGC given the head room between the current usage and legislated cap. A property with a high capital value will not receive a greater benefit from these community facilities compared to a lower value property that justifies being rated higher. Nor are these community facilities linked to property value.

Federated Farmers requests

- Federated Farmers want council to identify areas in which they can move to increase the use of the UAGC as well as more targeted rating models.

About

Federated Farmers of New Zealand is a primary sector organisation that represents farmers, and other rural businesses. Federated Farmers has a long and proud history of representing the needs and interests of New Zealand farmers.

The Federation aims to add value to its members' businesses. Our key strategic outcomes include the need for New Zealand to provide an economic and social environment within which:

- i. Our members may operate their businesses in a fair and flexible commercial environment;
- ii. Our members' families and their staff have access to service essential to the needs of the rural community; and
- iii. Our members adopt responsible management and environmental practices.

Ends

35



First name: Chris

Last name: Mercer

Age:

25-34

Gender:

Male

Ethnicity:

Pakeha / NZ European

HEARING: Let us know if you wish to speak at a hearing and your preferred location. *

I do NOT wish to speak in support of my submission and ask that the following submission be fully considered.

Feedback

In our consultation document, we set out how Council's decision on whether to modify the delivery timeline of a project will be guided by the criteria below.

1. the need to maintain a balance across the four pillars of well-being – cultural, environmental, economic, and social
2. prioritisation in line with the eight strategic priorities that we identified and developed as part of the LTP
3. resource considerations such as the availability of materials, contractors, and appropriately skilled staff

Read our Consultation document [HERE](#)

Do you agree with these criteria?

Mostly agree

Do you have any comment to share with us?

Council has highlighted a number of proposed changes to some of its key projects, please let us know if you agree with these changes.

You can read about changes to our capital expenditure programme [HERE](#)

Water projects - Do you agree with these changes?

Mostly agree

Do you have any comment to share with us?

The nature of the soils is a known thing and not a shock, surely this should be better costed into future projects. It's not like its a surprise to find pumice soil. Overall, much better costings clearly need to be done and considerations should be made to anything 12-24+ months out having a larger buffer to better account for economic factors poorly considered in current plans.

T24Consult Page 1 of 3

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With the clear challenges to the three waters scheme proposed by the government, i don't think its responsible to plan for millions in debts to be palmed off in the near future. Whats the alternative plan and impact on the community if this doesnt happen? Has that even been considered?

Transport projects – Do you agree with these changes?

Mostly agree

Do you have any comment to share with us?

It's important to prioritise the second bridge and to improve roads to enable sustainable growth and efficient economic development.

Community facilities projects – Do you agree with these changes?

Mostly agree

Do you have any comment to share with us?

I think the housing stock needs a complete rethink and redevelopment. It's clearly not up to scratch and so this should be a larger project of looking at whether remediation is worth it or whether redevelopment is a better option.

Wastewater projects – Do you agree with these changes?

Mostly agree

Do you have any comment to share with us?

With the clear challenges tot h three waters scheme proposed by the government, i don't think its responsible to plan for millions in debts to be palmed off in the near future. Whats the alternative plan and impact on the community if this doesnt happen? Has that even been considered?

Solid waste projects – Do you agree with these changes?

Strongly agree

Do you have any comment to share with us?

Investments projects – Do you agree with these changes?

Mostly agree

Do you have any comment to share with us?

The waiora house portion seems to be out of date as this project already saw a 31% increase above that noted before ground was broken. The figure in this plan seems to reflect the old cost and not the revised cost of 7.7million. Where does the additional funding come from, what is the impact on the LTP with this increased cost now?

Council has updated some of its fees and charges and made some changes to how they are structured.

We provide a wide range of services and functions to the community that carry costs. Some of these costs are paid for out of general or targeted rates and others are recovered from government. However, where a service or activity benefits an individual customer (e.g., a dog registration benefits an individual dog owner, or a resource consent benefits the individual applicant), Council applies a fee to cover the cost of delivering that service. Read more [HERE](#)

35

Overall, do you agree with these changes?

Mostly agree

Do you have any comment to share with us?

We are proposing some changes to our Significance and Engagement policy.

Council is committed to making informed and sustainable decisions in the best interests of our communities. We want to ensure the decisions we make made reflect the aspirations of tangata whenua, residents, ratepayers, community groups and business. To help us to make the best decisions, we engage with our communities daily using a number of tools. Sometimes, this is simply to provide information, and other times we seek input into our decision-making processes. Read more [HERE](#)

Overall, do you agree with these changes?

Mostly agree

Do you have any comments to share with us?

We are proposing a slight increase to the Town Centre Taupō Management targeted rate.

Towncentre Taupō (TCT) is a member-based organisation established to promote the development of Taupō's Central Business District as a safe and vibrant space, while retaining our town's unique identity. All businesses operating within Taupō's town centre are therefore members of TCT by default. Council supports TCT in its work through a dedicated target rate which is paid by TCT members as part of their annual rates. Read more [HERE](#)

Do you agree with this increase?

Mostly disagree

Do you agree with these criteria?

I don't know

Do you have any comments to share with us?

Attached Documents

File

No records to display.

36

**Organisation:**

Taupo Business Chamber

First name: Rory**Last name:** Scott**On behalf of:**

Taupo Business Chamber

Age:**Gender:****Ethnicity:****HEARING:** Let us know if you wish to speak at a hearing and your preferred location. *

Yes

Taupo

Additional requirements for hearing:

Feedback

In our consultation document, we set out how Council's decision on whether to modify the delivery timeline of a project will be guided by the criteria below.

1. the need to maintain a balance across the four pillars of well-being – cultural, environmental, economic, and social
2. prioritisation in line with the eight strategic priorities that we identified and developed as part of the LTP
3. resource considerations such as the availability of materials, contractors, and appropriately skilled staff

Read our Consultation document [HERE](#)

Do you agree with these criteria?

Mostly agree

Do you have any comment to share with us?

Transport projects – Do you agree with these changes?

Do you have any comment to share with us?

1. TRANSPORT UPGRADES: Council has identified several important council roads that need low-

T24Consult Page 1 of 5

cost widening work that will need to be met by Council.

2. We consider roading upgrades to be of critical importance for business continuity in the district and any costs that fall outside of New Zealand Transport Agency funding need to be prioritised.

Community facilities projects – Do you agree with these changes?

Do you have any comment to share with us?

1. TAUPO TOWN CENTRE TRANSFORMATION PROJECT: Council are proposing to top-up the \$20.6 million of Government Funding for this project by \$4 million of Council funding to ensure they achieve the full aims of this project.
2. We support this proposal as this is a once in a generation opportunity (possibly even more) for Council to invest in our township and for our District to prosper.

1. CIVIC ADMINISTRATION BUILDING FIT-OUT: Council have entered into a partnership with Te Whare Hono o Tūwharetoa Limited to construct the new civic administration building which Council will lease part of it. Council has advised that fit-out costs have increased by \$2.5 million due to the rise in construction costs.
2. We expect cost increases in the current market due to the ongoing issue with supply and materials however we do not have a meaningful way of determining whether this increase is in line with market expectations.

Wastewater projects – Do you agree with these changes?

Do you have any comment to share with us?

No

Solid waste projects – Do you agree with these changes?

Do you have any comment to share with us?

No

Investments projects – Do you agree with these changes?

Do you have any comment to share with us?

1. TOWNCENTRE TAUPO MANAGEMENT RATE: Towncentre Taupo (TCT) is funded through a targeted rate paid by CBD businesses. TCT is requesting an additional \$8,523 over its forecast budget, an increase of just under \$19 (GST inc.).
2. In the current environment we consider it essential for business in the town centre that TCT is adequately funded to provide ongoing support for each eligible business.

Council has updated some of its fees and charges and made some changes to how they are structured.

We provide a wide range of services and functions to the community that carry costs. Some of these costs

36

are paid for out of general or targeted rates and others are recovered from government. However, where a service or activity benefits an individual customer (e.g., a dog registration benefits an individual dog owner, or a resource consent benefits the individual applicant), Council applies a fee to cover the cost of delivering that service. Read more [HERE](#)

Overall, do you agree with these changes?

Do you have any comment to share with us?

1. RATES: Increased expenditure means increased rates. Council have forecast an expected increase of 8.35% in rates for the 2022-23 financial year.
2. We consider that a rates increase was to be expected and on the basis of the deliverables the increased rates revenue will finance and following a capped rates increase that was applied during the early stages of the COVID-19 pandemic the proposed increase is acceptable.

We are proposing some changes to our Significance and Engagement policy.

Council is committed to making informed and sustainable decisions in the best interests of our communities. We want to ensure the decisions we make made reflect the aspirations of tangata whenua, residents, ratepayers, community groups and business. To help us to make the best decisions, we engage with our communities daily using a number of tools. Sometimes, this is simply to provide information, and other times we seek input into our decision-making processes. Read more [HERE](#)

Overall, do you agree with these changes?

Strongly agree

Do you have any comments to share with us?

We have had requests recently for greater access to key data for projects.

We are proposing a slight increase to the Town Centre Taupō Management targeted rate.

Towncentre Taupō (TCT) is a member-based organisation established to promote the development of Taupō's Central Business District as a safe and vibrant space, while retaining our town's unique identity. All businesses operating within Taupō's town centre are therefore members of TCT by default. Council supports TCT in its work through a dedicated target rate which is paid by TCT members as part of their annual rates. Read more [HERE](#)

Do you agree with this increase?

Strongly agree

Do you agree with these criteria?

I don't know

Do you have any comments to share with us?

1. TOWNCENTRE TAUPŌ MANAGEMENT RATE: Towncentre Taupo (TCT) is funded through a targeted rate paid by CBD businesses. TCT is requesting an additional \$8,523 over its forecast budget, an increase of just under \$19 (GST inc.).

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In the current environment we consider it essential for business in the town centre that TCT is adequately funded to provide ongoing support for each eligible business.

Do you have any other feedback?

The Taupo Business Chamber is a local & independent voice for business in the Taupo District (District). We exist to promote business growth and vitality across the District.

We represent approximately 219 members who collectively employ over 1500 staff.

Taupo Business Chamber considers that business growth, prosperity and vitality in the District is crucial to maintaining a prosperous and liveable District that supports the wellbeing of our whole community.

Based on our preliminary assessment of the Council Consultation Document against our Advocacy Manifesto we would like to submit the points raised above and the following additional comments and to request a slot to speak to these at your hearings.

1. OTHER COMMENTS:

- a. MEMBERSHIP FEEDBACK: As part of our submission process, we asked our members to provide feedback on the Consultation document that could be included in our submission. Although limited, the feedback received supports the boards Statements above.
- b. TAUPO TOWN CENTRE TRANSFORMATION PROJECT: We would like more information on where will the additional funding be sourced from?
- c. TRANSPORT UPGRADES: Will more information available on the specifics and what is planned, what the anticipated costs will be and where these will be sourced from?
- d. CIVIC ADMINISTRATION BUILDING FIT-OUT: Is there more information available detailing the reasons for the cost increases including the fitout specifications? Where will the additional funding be sourced from?
- e. RATES: Although an increase was expected following the agreement by TDC not to increase rates during the early on-set of COVID-19, the ongoing pandemic, inflation and increased living costs make an 8.35% increase a significant additional cost for some business owners. Perhaps a more gradual increase would be appropriate.
- f. BUSINESS SPECIFIC ASSISTANCE: The pandemic has caused significant business disruption in the District. It will be critical that TDC implements additional business support strategies into the Annual Plan.
- g. CLIMATE CHANGE & SUSTAINABILITY: This is one of the most significant issues facing our community and world as a whole. It is important to our membership that there is a

T24Consult Page 4 of 5

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continued focus on these issues.

Attached Documents

File
No records to display.

37



First name: Bruce

Last name: Campbell

Age:

75+

Gender:

Male

Ethnicity:

Pakeha / NZ European

HEARING: Let us know if you wish to speak at a hearing and your preferred location. *

I do NOT wish to speak in support of my submission and ask that the following submission be fully considered.

Feedback

In our consultation document, we set out how Council's decision on whether to modify the delivery timeline of a project will be guided by the criteria below.

1. the need to maintain a balance across the four pillars of well-being – cultural, environmental, economic, and social
2. prioritisation in line with the eight strategic priorities that we identified and developed as part of the LTP
3. resource considerations such as the availability of materials, contractors, and appropriately skilled staff

Read our Consultation document [HERE](#)

Do you agree with these criteria?

Mostly agree

Do you have any comment to share with us?

Council has highlighted a number of proposed changes to some of its key projects, please let us know if you agree with these changes.

You can read about changes to our capital expenditure programme [HERE](#)

Water projects - Do you agree with these changes?

Strongly agree

Do you have any comment to share with us?

Transport projects – Do you agree with these changes?

Mostly agree

T24Consult Page 1 of 3

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Do you have any comment to share with us?

Community facilities projects – Do you agree with these changes?

Neither agree nor disagree

Do you have any comment to share with us?

Wastewater projects – Do you agree with these changes?

Strongly agree

Do you have any comment to share with us?

Solid waste projects – Do you agree with these changes?

Strongly agree

Do you have any comment to share with us?

Investments projects – Do you agree with these changes?

Neither agree nor disagree

Do you have any comment to share with us?

Council has updated some of its fees and charges and made some changes to how they are structured.

We provide a wide range of services and functions to the community that carry costs. Some of these costs are paid for out of general or targeted rates and others are recovered from government. However, where a service or activity benefits an individual customer (e.g., a dog registration benefits an individual dog owner, or a resource consent benefits the individual applicant), Council applies a fee to cover the cost of delivering that service. Read more [HERE](#)

Overall, do you agree with these changes?

Mostly agree

Do you have any comment to share with us?

We are proposing some changes to our Significance and Engagement policy.

Council is committed to making informed and sustainable decisions in the best interests of our communities. We want to ensure the decisions we make made reflect the aspirations of tangata whenua, residents, ratepayers, community groups and business. To help us to make the best decisions, we engage with our communities daily using a number of tools. Sometimes, this is simply to provide information, and other times we seek input into our decision-making processes. Read more [HERE](#)

Overall, do you agree with these changes?

Mostly agree

Do you have any comments to share with us?

37

We are proposing a slight increase to the Town Centre Taupō Management targeted rate.

Towncentre Taupō (TCT) is a member-based organisation established to promote the development of Taupō's Central Business District as a safe and vibrant space, while retaining our town's unique identity. All businesses operating within Taupō's town centre are therefore members of TCT by default. Council supports TCT in its work through a dedicated target rate which is paid by TCT members as part of their annual rates.

Read more [HERE](#)

Do you agree with this increase?

Strongly agree

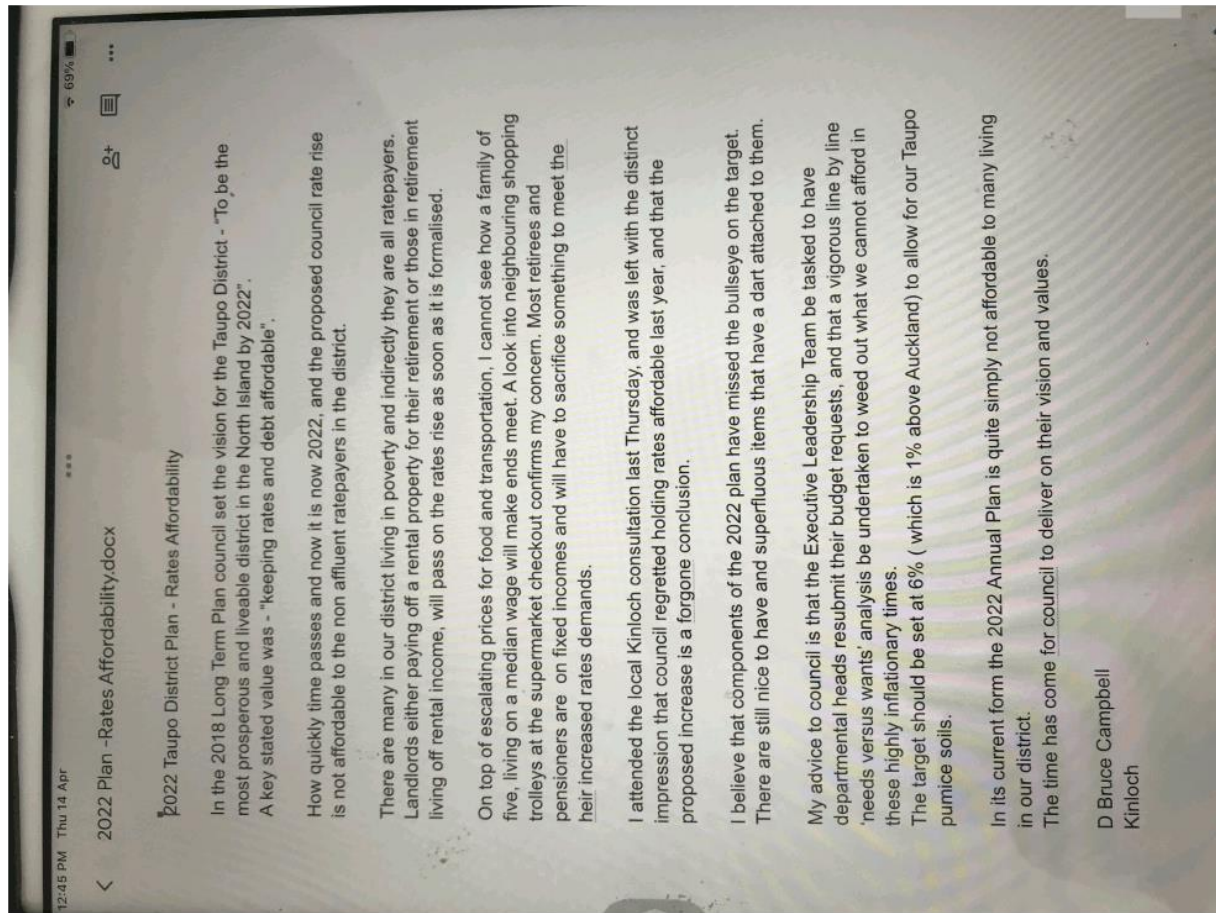
Do you agree with these criteria?

Strongly agree

Do you have any comments to share with us?

Attached Documents

File
642B58F4-B12D-45C9-9193-E7B9541C5FA3



38



First name: Richard

Last name: Hoadley

Age:

75+

Gender:

Male

Ethnicity:

Pakeha / NZ European

HEARING: Let us know if you wish to speak at a hearing and your preferred location. *

I do NOT wish to speak in support of my submission and ask that the following submission be fully considered.

Feedback

In our consultation document, we set out how Council's decision on whether to modify the delivery timeline of a project will be guided by the criteria below.

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3. resource considerations such as the availability of materials, contractors, and appropriately skilled staff

Read our Consultation document [HERE](#)

Do you agree with these criteria?

Neither agree nor disagree

Do you have any comment to share with us?

Council has highlighted a number of proposed changes to some of its key projects, please let us know if you agree with these changes.

You can read about changes to our capital expenditure programme [HERE](#)

Water projects - Do you agree with these changes?

Mostly agree

Do you have any comment to share with us?

Transport projects – Do you agree with these changes?

Mostly agree

T24Consult Page 1 of 3

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Do you have any comment to share with us?

Community facilities projects – Do you agree with these changes?

Neither agree nor disagree

Do you have any comment to share with us?

Wastewater projects – Do you agree with these changes?

Neither agree nor disagree

Do you have any comment to share with us?

Solid waste projects – Do you agree with these changes?

Neither agree nor disagree

Do you have any comment to share with us?

Investments projects – Do you agree with these changes?

Mostly disagree

Do you have any comment to share with us?

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Overall, do you agree with these changes?

Neither agree nor disagree

Do you have any comment to share with us?

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Overall, do you agree with these changes?

Mostly disagree

Do you have any comments to share with us?

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Read more [HERE](#)

Do you agree with this increase?

Mostly agree

Do you agree with these criteria?

Neither agree nor disagree

Do you have any comments to share with us?

Do you have any other feedback?

The CEO has advised an Emissions Strategy is being prepared.

Until that strategy has been tabled for consideration and approved I have no way of reading what is intended as payments to Government, if any.

I have found no budget allowance in the Annual Plan documents.

The mayor has indicated that some of the proposed 8% rates increase is to help 'pay for emissions'. How can he justify that increase when he has no budget allowance that his rate payers can consider. He must delay this increase until more information has been made public and approved by ratepayers.

TDC need to also confirm why there is a need to buy carbon credits before the Government has proved there is a need. I for one do not accept the reports of modeling that are only based on assumptions. Not facts.

TDC need to make public the confirmed scientific evidence that shows 'emissions' need to be subject to a tax for no proven outcome. A waste of time and money for everyone, both in the Taupo District and NZ.

Attached Documents

File
No records to display.

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Organisation:

Turangi foodbank

First name: Maggie

Last name: Stewart

On behalf of:

Turangi foodbank

Age:

Gender:

Ethnicity:

HEARING: Let us know if you wish to speak at a hearing and your preferred location. *

Yes

Turangi

Additional requirements for hearing:

Feedback

In our consultation document, we set out how Council's decision on whether to modify the delivery timeline of a project will be guided by the criteria below.

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2. prioritisation in line with the eight strategic priorities that we identified and developed as part of the LTP
3. resource considerations such as the availability of materials, contractors, and appropriately skilled staff

Read our Consultation document [HERE](#)

Do you agree with these criteria?

Strongly agree

Do you have any comment to share with us?

The four pillars align with our values here at Turangi foodbank.

Council has highlighted a number of proposed changes to some of its key projects, please let us know if you agree with these changes.

You can read about changes to our capital expenditure programme [HERE](#)

T24Consult Page 1 of 4

Water projects - Do you agree with these changes?

Strongly agree
Do you have any comment to share with us?

Transport projects – Do you agree with these changes?

Strongly agree
Do you have any comment to share with us?

Community facilities projects – Do you agree with these changes?

Strongly agree
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Wastewater projects – Do you agree with these changes?

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Do you have any comment to share with us?

Investments projects – Do you agree with these changes?

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Overall, do you agree with these changes?

Strongly agree
Do you have any comment to share with us?

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Overall, do you agree with these changes?

Strongly agree

Do you have any comments to share with us?

We are proposing a slight increase to the Town Centre Taupō Management targeted rate.

Towncentre Taupō (TCT) is a member-based organisation established to promote the development of Taupō's Central Business District as a safe and vibrant space, while retaining our town's unique identity. All businesses operating within Taupō's town centre are therefore members of TCT by default. Council supports TCT in its work through a dedicated target rate which is paid by TCT members as part of their annual rates. Read more [HERE](#)

Do you agree with this increase?

Strongly agree

Do you agree with these criteria?

Strongly agree

Do you have any comments to share with us?

Do you have any other feedback?

Turangi foodbank has been working in the community since 2008 and the need for our service has grown. We apply to the board every year for a grant, which we are very grateful for, however we feel a service agreement would be beneficial to both parties. We have worked closely with Civil Defence during times of natural emergencies, we also work closely with other social agencies within Turangi and govt organizations such as MoH, MSD and MoJ. More recently we have been working through feeding families who have been effected by covid. Families aren't always on benefits, they are often working people who need help because of housing and food inflation and aren't able to meet their living needs. The cost of living have increased across the board, effecting middle income families, seniors on nz super and we have a lot of grandparents looking after children that regularly need our help.

We work with organisations such as the seeker foundation and nz food network and we are always looking for new avenues to help us meet the need in our community.

The increase in demand has meant we have had to employ a second staff member and the running costs have risen.

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With covid we've needed to run under a non contact policy, so the majority of our parcels have been delivered, which has in turn increased fuel costs. In order to keep ourselves safe from covid it was of the upmost importance to run this way. We have successfully remained 100 percent covid free so far.

We need a consistent income stream to help relieve the pressure of running the foodbank. Due to covid our philanthropic funders have not been able to help us which has meant we have had to rely heavily on donations and other small funders.

We look forward to meeting with council and having a discussion about the best way forward for the foodbank.

Attached Documents

File
Foodbank Budget 2022 to 2023 Lotteries
Foodbank 2021 Reports

Turangi FoodBank Inc- Budget 1 July 2022 to 30 June 2023												
			Lotteries	COGS	Bay Trust	TMTB	Heartland	TKNT	Donations	KCEPT	TDC	
ACC Levy	\$ 170.00	Lotteries	\$ 170.00									
Accounting review	\$ 500.00	Donations							\$ 500.00			
Charities fee	\$ 52.00	Donations							\$ 52.00			
Vehicle delivery expenses	\$ 3,200.00	TDC									\$ 3,200.00	
Food stock	\$ 45,000.00	Various				\$ 2,000.00	\$ 4,000.00	\$ 15,000.00	\$ 14,000.00	\$ 10,000.00		
Indemnity Insurance	\$ 500.00	TDC									\$ 500.00	
Kiwisaver employer	\$ 1,800.00	Lotteries	\$ 1,800.00									
Office expenses	\$ 950.00	TDC									\$ 950.00	
Phone/Internet	\$ 2,800.00	TDC									\$ 2,800.00	
Rent and power	\$ 1,160.00	TDC									\$ 1,160.00	
Wages	\$ 50,000.00	Various	\$ 18,030.00	\$ 5,000.00	\$ 10,000.00				\$ 16,030.00		\$ 940.00	
Xero annual fee	\$ 450.00	TDC									\$ 450.00	
	\$ 106,582.00		\$ 20,000.00	\$ 5,000.00	\$ 10,000.00	\$ 2,000.00	\$ 4,000.00	\$ 15,000.00	\$ 30,582.00	\$ 10,000.00	\$ 10,000.00	\$ 106,582.00



Turangi Foodbank Inc.

Registered Charity & Incorporated Society – Registration number CC39301

Annual Reports

For the year ended 30 June 2021



Turangi Foodbank Inc.
Annual Reports
For the year ended 30 June 2021

Statement of Disclaimer

I have Compiled the Annual Report of Turangi Foodbank Inc. for the year ended 30 June 2021.

This Annual Report has been prepared in accordance with, and for the purposes of, the Financial Reporting Act 1993 to provide information to the members. Accordingly, the Annual report should not be relied upon for any other purpose.

A compilation is limited to the collection, classification and summarisation of information provided by the client.

I have also reviewed the financial statements for my client.

The compilation and review have been conducted for at the request of my and for the purposes of my client only and I accept no responsibility on any grounds whatever, including liability in negligence, to any other party.

A handwritten signature in blue ink, appearing to read "Lance Morrison", written over a horizontal line of small dots.

Lance Morrison - Accountant



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Turangi Foodbank Incorporated

ENTITY INFORMATION

AND

STATEMENT OF SERVICE PERFORMANCE

Turangi Foodbank Incorporated was registered as a charity on 16 April 2009.

The Foodbank is governed by a 6-member committee elected each year at an AGM. The committee consists of volunteers, including the Chairperson, Treasurer and four other members. The committee meets monthly. A part-time coordinator is employed to take care of the day-to-day running of the Foodbank. The Foodbank operates pursuant to a Constitution which includes 11 Objects. The first of these Objects (3.1) is "To provide emergency food parcels to people in genuine need of support."

The main source of funding for the Foodbank is in the form of donations and grants. Funds are sourced from a range of donors, including local government, community organisations, local businesses, and supporters, and online donations. The local supermarket donates damaged food stock and there is a collection point there where donations of food and other essential household items are left by members of the public.

Turangi Foodbank exists to assist families and individuals in the short term, by providing them with emergency food. This has a positive impact, not only in making sure adults and children in the community are nourished, but also alleviates pressure on hard-up families. Children are more inclined to attend school, and there is less friction in families because the basic need for food is met and any money available can be used for rent and power.

In the year ended 30 June 2021 the Foodbank assisted a growing number of people in the community. A total number of 1858 food parcels were delivered; a large increase on the 1463 parcels provided the previous year. Almost every food parcel equates to seven days food, so we delivered approximately 13000 days of food to the needy in our community. As in the previous year, the reason for the increase is that more families are moving back to Turangi, to escape the costs of city living, plus rental costs have increased, and there are few jobs available. We were already experiencing increased demand before Covid-19 arrived. More people arrived in the district and many part-time workers, such as those in the hospitality industry, lost their jobs. This added to the need for the Foodbank's services. We have kept the 0800 number we obtained in lockdown last year. During lockdown we had to adjust our operations and increase the number of hours we employ our Coordinator, to cope with the ever-increasing demand for food parcels, this has not changed.

Beneficiaries of the Foodbank are families, including children, mental health patients, the elderly, the unemployed, solo parent beneficiaries, and others.

The following statistics show the number of adults and dependents fed, their ethnicity and from where we received referrals. WINZ referrals are included in the self-referrals.

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Foodbank Report

For Dates

Between: 01-Jul-20 And: 30-Jun-21

Adults

Female	962
Male	897
Total	1,859

Total Parcels	1,858
----------------------	--------------

Dependants

	Males	Females
0-5	550	619
6-13	619	501
14-16	358	209
TOTAL	1,527	1,329

Referrals

Ariki Office	1
Aunty	4
awhina society	2
brother	2
CLAW	2
Daughter	7
facebook	2
fam start	12
family	3
Family Start	2
Family&Financia solution Tru	2
Friend	28
grandaughter	3
Mother	2
mother inlaw	1
mum	7
nana	2
neice	1
NZ Police	1
O Tamariki	6
other	2
PARS	1
Pinnacle Health	4
Police	6
Self	1,604
Sister	9
son	3
Taupo Budget Service	8

Ethnicity

European	139
Maori	435
Ngati Tuwharetoa	1,200
Other	71
Pacific Islander	14
Total	1,859

TBS	1
Te Korowai Roopu Tautoko I	106
Tuwharetoa Health	7
W & I	17
WINZ	1
Total	1,859

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Foodbank Report

For Dates

Between: 01-Jul-19 And: 30-Jun-20

Adults

Female	729
Male	734
Total	1,463

Total Parcels	1,463
----------------------	--------------

Dependants

	Males	Females
0-5	401	492
6-13	446	311
14-16	244	122
TOTAL	1,091	925

Referrals

Age Concern	2
ARC	1
Aunty	1
civil defence	41
CLAW	1
CYPFS	1
fam start	53
Family Start	1
Friend	28
grandmother	1
harcourts	3
MHNZ	5
Mother	3
mum	1
nana	3
NZ Police	1
O Tamariki	4
PARS	6
People	5
Police	3
Probation officer	1
rsa	1
Self	1,160
Taupo Budget Service	12
Te Korowai Roopu Tautoko I	49
Tuwharetoa Health	2
W & I	71
Whanau Oraki Tuwharetoa	1
WINZ	2
Total	1,463

Ethnicity

European	137
Maori	380
New Zealander	4
Ngati Tuwharetoa	917
Other	12
Pacific Islander	13
Total	1,463

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The Turangi Foodbank is well known and supported by the Turangi community. We receive donations from the supermarket collection bin, and the gifting of supermarket cash cards. In July 2020 we held our mid-winter cash appeal. We appealed to local businesses and the community in general, and received very welcome online donations. In November 2020 a food drive was held through all the local streets, with the assistance of Police, Fire and Ambulance crews. Many local volunteers collected and loaded the food into vehicles and unloaded it back at the Foodbank.

Another food drive was carried out around the lakeside at the settlements of Pukawa, Kurutau and Omori over the summer holiday period and it was very successful. Residents and holidaymakers in those communities came out to assist co-ordinating and manning vehicles to collect the donated goods. Again Police, Fire and Ambulance services assisted.

During the year we joined NZ Food Network, a food rescue organisation, and this has made a difference to the makeup of our parcels, in that we can supply our clients with healthier options.

Vegetable plants were donated to members of Turangi Garden Club, and they agreed to plant and grow vegetables for us. Some members are already dropping in fresh vegetables. The local prison has also agreed to grow vegetables for the Foodbank. Local hunters have donated deer to the Foodbank, these were processed at a licensed home kill facility at no cost to the Foodbank and have been a welcome addition to our food parcels.

The Foodbank coordinator is a valuable member of the Turangi community. Over the past year she has continued to liaise with other social services and sponsors. She has provided information, and assisted and advocated for those in need, as well as run the Foodbank in a highly efficient manner.

Turangi Foodbank continued to provide a community service more essential than ever in the year ended 30 June 2021. Our profile has lifted in the past year, we are experiencing increased community engagement in the way of local donations and assistance. People are becoming more aware of the need in our community.

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Turangi Foodbank Inc
Statement of Financial Performance
for Year ended 30 June 2021

	2021	2020
	\$	\$
Income		
Interest	20	24
Donations from:		
Bay Trust	5,000	5,000
Community Organisation Grants - Government	5,000	5,575
General Donations	11,216	14,417
Genesis Energy Limited	2,000	2,000
King Country Electric Power Trust	-	8,000
Lake Rotoaira Forest Trust	5,000	-
Len Reynolds Trust	-	5,000
Lotteries Grant	20,000	20,000
Red Cross	3,305	2,630
Trustpower Limited	4,000	1,000
TDC (Civil Defence) COVID 19 Donation	11,434	-
TDC (Taupo District Council - Tgi Community Board)	7,715	5,500
Turangi Womens Club	-	2,500
Te Kotahitanga o Ngati Tuwharetoa (TKNT)	10,000	-
Tuwharetoa Māori Trust Board (TMTB)	2,000	7,000
Total Income	86,690	78,646
Expenditure		
ACC Levies	170	160
Accounting	460	403
Groceries/Food Stock	40,442	34,175
Insurance	486	486
Kiwisaver Employer Contribution	1,162	871
Office expenses	882	1,673
Office Supplies	307	426
Delivery Vehicle Expenses	2,538	2,267
Printing & Stationery		134
Rent	1,159	869
Salaries	38,720	29,126
Subscriptions	51	51
Telephone & Internet	2,685	2,386
Total Expenses	89,062	73,027
Net Income/(Deficit)	(2,372)	5,619

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Turangi Foodbank Inc
Statement of Financial Position
as at 30 June 2021

<u>Assets</u>	2021 \$	2020 \$
<u>Current Assets</u>		
Bank Account	33,227	36,102
Unspent Gift Vouchers On Hand	203	
Total Current Assets	<u>33,430</u>	<u>36,102</u>
<u>Liabilities</u>		
<u>Current Liabilities</u>		
Accounts Payable	996	1,713
PAYE Payable	980	563
Total Current Liabilities	<u>1,976</u>	<u>2,276</u>
Net Assets	<u>31,454</u>	<u>33,826</u>
<u>Equity</u>		
Current Years Surplus/(Deficit)	(2,372)	5,619
Retained Earnings	33,826	28,207
Total Equity	<u>31,454</u>	<u>33,826</u>



Turangi Foodbank Inc.

Notes to the Financial Statements

For the year ended 30 June 2021.

1. Statement of Accounting Policies

Reporting Entity

The society is subject to the provisions of the Incorporated Societies Act 1908 and the Charities Act 2005 and is a Registered Charity; Registration number CC39301 – registered on 16 April 2009.

Measurement Base

The accounting principles recognised as appropriate for the measurement and reporting of earning and financial position on a historical basis are followed by the society.

Specific Accounting Policies

GST

These statements have been prepared on a GST inclusive basis of accounting.

Changes in Accounting Policy

All accounting policies have been applied on the basis consistent with the previous year.

2. Contingent Liabilities

There were no known contingent liabilities at balance date.

There were no known capital commitments at balance date.

3. Audit

These financial statements have not been subject to Audit.

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Organisation:

Kinloch Families Trust

First name: Belinda

Last name: Walker

Age:

Gender:

Ethnicity:

HEARING: Let us know if you wish to speak at a hearing and your preferred location. *

Yes

Taupo

Additional requirements for hearing:

Feedback

In our consultation document, we set out how Council's decision on whether to modify the delivery timeline of a project will be guided by the criteria below.

1. the need to maintain a balance across the four pillars of well-being – cultural, environmental, economic, and social
2. prioritisation in line with the eight strategic priorities that we identified and developed as part of the LTP
3. resource considerations such as the availability of materials, contractors, and appropriately skilled staff

Read our Consultation document [HERE](#)

Do you agree with these criteria?

Mostly agree

Do you have any comment to share with us?

Council has highlighted a number of proposed changes to some of its key projects, please let us know if you agree with these changes.

You can read about changes to our capital expenditure programme [HERE](#)

Water projects - Do you agree with these changes?

T24Consult Page 1 of 3

40

Mostly agree
Do you have any comment to share with us?

Transport projects – Do you agree with these changes?

Strongly agree
Do you have any comment to share with us?

Community facilities projects – Do you agree with these changes?

Mostly agree
Do you have any comment to share with us?

Wastewater projects – Do you agree with these changes?

Mostly agree
Do you have any comment to share with us?

Solid waste projects – Do you agree with these changes?

Mostly agree
Do you have any comment to share with us?

Investments projects – Do you agree with these changes?

Mostly agree
Do you have any comment to share with us?

Council has updated some of its fees and charges and made some changes to how they are structured.

We provide a wide range of services and functions to the community that carry costs. Some of these costs are paid for out of general or targeted rates and others are recovered from government. However, where a service or activity benefits an individual customer (e.g., a dog registration benefits an individual dog owner, or a resource consent benefits the individual applicant), Council applies a fee to cover the cost of delivering that service. Read more [HERE](#)

Overall, do you agree with these changes?

Neither agree nor disagree
Do you have any comment to share with us?

We are proposing some changes to our Significance and Engagement policy.

Council is committed to making informed and sustainable decisions in the best interests of our communities. We want to ensure the decisions we make made reflect the aspirations of tangata whenua, residents, ratepayers, community groups and business. To help us to make the best decisions, we engage with our communities daily using a number of tools. Sometimes, this is simply to provide information, and other times we seek input into our decision-making processes. Read more [HERE](#)

40

Overall, do you agree with these changes?

Mostly agree

Do you have any comments to share with us?

We are proposing a slight increase to the Town Centre Taupō Management targeted rate.

Towncentre Taupō (TCT) is a member-based organisation established to promote the development of Taupō's Central Business District as a safe and vibrant space, while retaining our town's unique identity. All businesses operating within Taupō's town centre are therefore members of TCT by default. Council supports TCT in its work through a dedicated target rate which is paid by TCT members as part of their annual rates. Read more [HERE](#)

Do you agree with this increase?

Mostly agree

Do you agree with these criteria?

Mostly agree

Do you have any comments to share with us?

Do you have any other feedback?

We would like to present on issues we have identified for the Kinloch Families community via survey. These relate directly to Kinloch. Please see our attached submission document.

When we had completed our submission we sent it out again to our Kinloch Families Facebook group to encourage them to make their own submission and, if for any reason they couldn't, we offered to include their comments in our submission. 2 Key comments were made; 1 the need for pedestrian crossing(s) on Kinloch Road to allow the safe crossing of the growing number of school aged children from the Lisland Dr side of Kinloch taking the bus to school (and therefore having to cross Kinloch Rd to get to the bus stop at Trev Terry) and 2. the urgent need for a Kinloch Foreshore plan covering cars, further access and environmental protection.

Attached Documents

File
KFT Annual Plan submission FINAL 2022



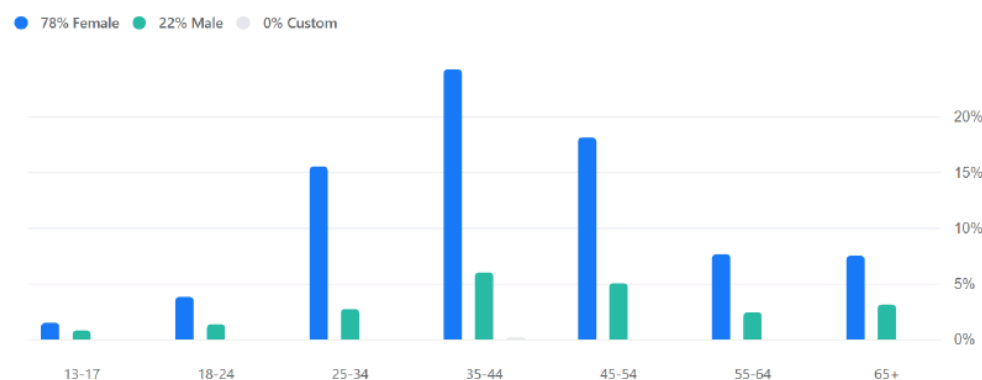
Kinloch Families Trust Annual Plan 2022/23 Submission

13 April 2022

Introduction

Kinloch Families Trust (KFT) is a new community organisation for Kinloch that is committed to a new model of community decision making. KFT has moved away from the traditional committee-based mode and towards an inclusive, interactive decision-making approach where everyone in the community can have a voice. It has proven popular, useful, and trusted and with a reach of over 750 members it provides a quick and responsive communication channel with a wide cross-section of residents (see figure 1 below). This channel is available to assist the Taupō District Council with their forward planning to meet the needs of a very dynamic Kinloch.

Figure 1: Kinloch Families Facebook Group by Age & Gender



Background

In 2021 the KFT was inspired to begin from the response of TDC CEO, Gareth Green, to the question 'What is the most useful thing Kinloch can put in a submission to the Long term Plan?' His reply was 'give the TDC an idea of the Kinloch community's priorities'.

Key to this submission was an online survey, the results of which were shared with the Council by way of a submission to the 2021 Long Term Plan process by our chairperson, Belinda Walker, and one of our founding members Tessa Knight – we're sure you'll remember baby Jayda's starring role in the presentation! From that very good start, the group is now more than twice the size it was then, and it can be considered a true voice of the Kinloch residents.

The Taupō District Council's willingness to listen has been demonstrated with the re-surfaced tennis courts, and the increased rubbish capacity on the lakefront. The KFT are also keen to develop constructive partnerships with anyone who will help us get the job done for Kinloch. This is demonstrated by our partnership with the private sector to develop the new Terrain Park initiative near Seven Oaks.

All Kinloch families will benefit from these positive relationships and progressive steps.



Growth

Kinloch has now become the 3rd largest urban population in the Taupō District, moving ahead of Mangakino, and this growth will continue. The residents contribute to the rating income received by the Council and will expect to see a proportionate share of Council's resources applied to Kinloch. These would take the form of enhanced community facilities such as reserves and roads. Of special note in the roading aspect is Whangamata Road, which has become an arterial road joining Kinloch and Taupō.

Accurately measuring Kinloch's permanent population size has been made more challenging by the last Census data being both unreliable and already out of date for Kinloch, however around 1200 people appears to be the current estimate. This does not take into account the large holiday home population which can increase demands on services such as wastewater up to 4 times the normal levels at peak times of the year (TDC Wastewater levels 2019/2020).

While historically Kinloch's permanent population has been predominantly the over 65s, the recent growth has seen a significant increase in the number of families. One consequence of this increase has been the local primary school, Wairakei Primary School, having to introduce a school zone to contain the school roll. Despite the introduction of the zone and building 2 new classrooms, Wairakei Primary School's roll continues to be very stretched, and Kinloch's growth has been acknowledged as one of the key factors.

To join the Kinloch Families Facebook Group, members are required to answer the question, "What's your connection to Kinloch?" and most answers in 2022 have been "moving or building in Kinloch"...we are growing fast!

We have surveyed our Kinloch Families Facebook Group to shape this submission to the TDC Annual Plan 2022/23. While we appreciate this is an Annual Plan process, we have used the opportunity to again ask our Kinloch Families community to look 10 years out and tell us their priorities.

Annual Plan Questions

Annual Plan specific questions – we have asked our Kinloch Families community for their views on the proposed shared district-wide water funding approach and the bringing forward of the investigative work on the Waikato Bridge Crossing.

- Shared District-wide water funding approach – 32% in favour but 43% unsure which may reflect a lack of knowledge and understanding of this issue
- Waikato Bridge Crossing investigative work – 77% in favour, reflecting the Kinloch Families community's concern for our access to Taupō as the population grows in Kinloch, Nukuhau & Acacia Bay.

We have chosen not to survey the Kinloch Drinking water standards NZ upgrade project as this is mandated from central government so neither TDC nor Kinloch residents have any choice in this matter. We have also not asked for views on the 'Refurbishing of the Exterior of the Kinloch Hall' as this is required maintenance of a TDC asset.



10 Year Priorities for Kinloch

To identify our potential list of priorities we ran an online workshop with our Kinloch Families Facebook group. Please see Figure 2 for the full list of options considered in our survey.

Figure 2: Online Workshop for list of options:

COMMUNITY FACILITIES

- Small supermarket and shopping centre
- Walking/Biking track along Whangamata Rd from the end of Kinloch Rd to Whangamata
- Stream Trail entrance & Oakdale Rd
- New, larger multi-purpose community building
- Electric charge station
- Petrol station
- Medical & chemist services
- Mini golf
- Community garden
- Kai pantry (community food sharing site)

COMMUNITY SERVICES

- Encourage the development of healthy aging activities e.g. singing & musical groups
- Public bus service to/from Taupō
- Tree care & management, i.e. health assessment, replanting, trimming trees on all berms & recommendations for tree type to plant
- Beautification of all public reserves, including lakefront reserve
- Beautification of Kinloch entrances & roundabouts
- Bike maintenance station - has tools for chain fixing, tyre levers, air pump etc

EDUCATIONAL ISSUES

- Permanent location for a full-time Early Learning Centre/Kindergarten
- Primary school
- Sports field
- Playgrounds review (including shade) for all Kinloch sites; Lakefront, Domain beside the Hall, Lisland Dr, End of Loch Haven Lane

TRAFFIC SAFETY ISSUES

- Bike lanes for Kenrigg Rd, Lisland Dr & Oakdale Rd
- Further upgrades to Whangamata Road given increasing traffic volumes
- Improved school bus stops
- Attractive entrance feature such as at Acacia Bay
- Speed limit review

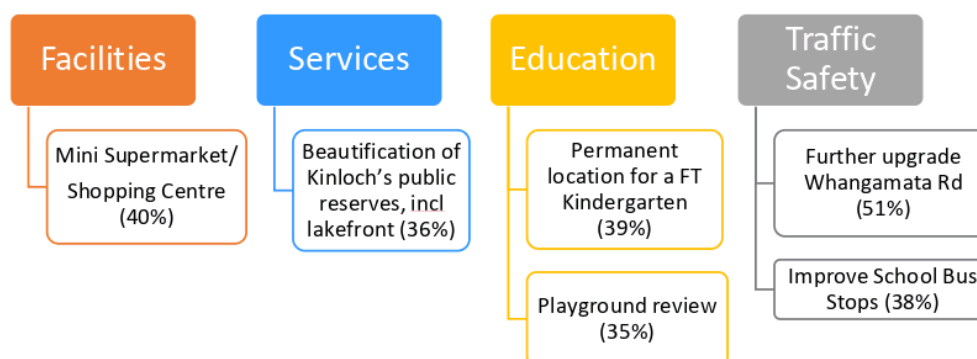


Results

What is considered 'Essential' for Kinloch?

In our survey we asked our Kinloch Families community to rate the items as Essential/Important/Neither Important nor Not Important/Not Important/Don't Care about this one. 136 of our 750 Kinloch Families Facebook group members responded to our survey, an almost 20% response rate! Please see Appendix 1 for full survey results.

The following items were rated by over 35% of our Kinloch Families respondents as 'Essential':



What happens if we combine 'Essential' & 'Important'?

Over 70% of Kinloch Families consider these Essential or Important		
Track along Whangamata Rd (70%)	Public bus service to/from Taupō (70%)	Tree Management (86%)

Actions Required

1. Identify key Whangamata Rd Improvements, including widening, road structural improvement & communicate these plans
2. Establish/support zoning for Mini Supermarket/shopping Centre
3. Work with the Kinloch Families community, developers, Ministry of Education, Central Kids Kindergarten Trust to establish a site for a full-time Kindergarten/Early Learning Centre
4. Immediate work to create safer Bus Stop solutions
5. Establish a Kinloch Playground Community Working Group between TDC & Kinloch Families Trust to create a Kinloch Playground Strategy & plan to implement it
6. Create a Tree Management & Reserve beautification plan
7. Deliver the Public Transport options and Whangamata Rd track as discussed in the Transport Plan submissions.

Conclusion for Kinloch

Make it safe, keep it beautiful, make it convenient and provide great early education & playgrounds for our Kinloch Families, young and old



Appendix 1: Full Survey Results

Kinloch Families Community Planning							
Q1. How important do you think the following community facilities are for Kinloch in the next 10 Years?							
	Essential	Important	Combined Essential & Important	Neither important nor unimportant	Not important	Don't care about this one	Weighted Average
Small supermarket and shopping centre	40%	28%	68%	9%	21%	2%	2.18
Walking/cycling track along Whangamata Rd from the end of Kinloch Rd to Whangamata Stream Trail entrance & Oardale Rd	21%	48%	70%	21%	7%	2%	2.21
New, larger multi-purpose community building	22%	35%	57%	24%	16%	3%	2.43
Electric charge station	15%	32%	47%	24%	15%	14%	2.20
Petrol station	22%	29%	50%	17%	30%	2%	2.62
Medical & chemist services	29%	31%	60%	16%	21%	4%	2.40
Mini golf	1%	8%	10%	26%	47%	17%	3.70
Community garden	4%	27%	30%	36%	24%	10%	3.10
Ball pit/ry (community food sharing site)	5%	27%	33%	32%	26%	10%	3.07
Other (please specify)							
Q2. How important do you think the following services are for Kinloch in the next 10 Years?							
	Essential	Important	Combined Essential & Important	Neither important nor unimportant	Not important	Don't care about this one	Weighted Average
Encourage the development of healthy aging activities e.g. singing & musical groups	7%	41%	48%	35%	9%	8%	2.71
Public bus service to/from Taupo	23%	46%	70%	11%	14%	4%	2.29
Tree care & management, i.e. health assessment, replanting, trimming trees on all farms & recommendations for tree type to plant	33%	53%	86%	10%	3%	1%	1.96
Reafforestation of all public reserves, including lake/roft reserve	36%	45%	81%	12%	4%	0%	1.93
Reafforestation of Kinloch entrance & roundabouts	24%	41%	65%	24%	7%	4%	2.26
Bike maintenance station - has tools for chain fixing, tyre levers, air pump etc	7%	42%	49%	30%	14%	7%	2.72
Other (please specify)							
Q3. How important do you think the following educational issues are for Kinloch in the next 10 Years?							
	Essential	Important	Combined Essential & Important	Neither important nor unimportant	Not important	Don't care about this one	Weighted Average
Permanent location for a full-time Early Learning Centre/nursery	35%	36%	71%	15%	5%	3%	2.02
Primary school	18%	36%	54%	15%	21%	3%	2.36
Sports field	16%	42%	58%	26%	12%	4%	2.43
Playgrounds (including shade) for all Kinloch sites, Lakefront, Domain Reside	35%	46%	81%	13%	5%	0%	1.89
Other (please specify)							
Q4. How important do you think the following traffic safety issues are for Kinloch in the next 10 Years?							
	Essential	Important	Combined Essential & Important	Neither important nor unimportant	Not important	Don't care about this one	Weighted Average
Bike lanes for Renegad Rd, Usland Dr & Oardale Rd	17%	29%	46%	25%	23%	3%	2.56
Further upgrades to Whangamata Road given increasing traffic volumes	51%	34%	85%	10%	4%	1%	1.69
Improved school bus stops	35%	41%	79%	14%	4%	3%	1.93
Attractive entrance feature such as at Acacia Bay	6%	35%	41%	31%	22%	6%	2.87
Speed limit review	11%	32%	43%	24%	31%	2%	2.82
Other (please specify)							
Q5. Do you support the proposed shared district-wide water funding approach? This new way shares the costs of providing our communities with reliable and safe water – with all across the district paying the same fixed water rate, this will result in an increase of 50 cents per ratepayer							
Answer Choices						Responses	
Yes						32%	
No						25%	
Unsure						43%	
Q6. Do you support bringing forward the Waikato Bridge Crossing investigative work (\$300,000) on the possibility of a new bridge downstream from the Control Gates Bridge? This work was originally scheduled for 2025-26, but higher than anticipated growth rates are already leading to heavier traffic flows, which will only intensify if left unaddressed							
Answer Choices						Responses	
Yes						77%	
No						7%	
Unsure						16%	



Q7. What age group do you belong to?	
Answer Choices	Responses
Under 12 years old	0%
12 to 19 years old	0%
20 to 29 years old	4%
30 to 49 years old	43%
50 to 65 years old	38%
66 to 80 years old	13%
80+ years old	0%
prefer not to say	3%

Q8. Do you have any other suggestions you would like to add?	
Respondents	
For local reading perhaps intersections need to be marked with "Stop" "Giveaway" before speed reductions are considered? And bike riders encouraged to follow the law and wear helmets. Signage along Whangamata rd reminding motorists of legal speed to pass a bus "20k no matter which way"	
Remove the blackberry from the lake frontage (down by the Whangamata stream)	
Improvement to Kinloch Road drainage and resurfacing of road between Kinloch sign to Lisland drive roundabout.	
Keeping kinloch small it's a gem and we should keep it that way the beach is overwhelmed sometimes protect this and don't bow down to growth. Nurture this not ruin it.	
Kinloch needs to take a crucial decision if to become more family friendly, and invest in services which support the daily life of the families and kids who constantly live here or keep this place as retirement village for golfers and fishers. We need to invest in kids activities and education infrastructure, reducing the amount of travel to town and attracting high quality families into the community.	
Better timing for community meetings Eg in weekends where many rate payers who are Bach owners op work out of town during the week can attend . Or have online attendance available thanks	
As a holiday home owner who spends about 1/3 of the year in Kinloch I appreciate its old school holiday resort look and feel. I don't want it as another busy modern town.	
Interesting survey. Thanks for what you do. Isn't the ministry of education and government the go to for schools and kindergartens? We used to have one but people started going to town as they thought other places were better. I thought the regional council does the bus stuff	
Be careful about trying to over grow our village if you want all those extra services move into Taupo	
everyday!!!!	
Extending driveable lakefront access in front of shop, it is so ridiculous that we cannot drive further along the lakefront and prime beachfront is just left to become an overgrown mess	
Free boat ramp for all, not just those with 4WD vehicles.	
We need more spaces like the Whangamata Stream walk as more subdivision occurs. Green space connected by green corridors, taking into account biodiversity, should form part of a structure plan for Kinloch. The Whangamata Stream track is over used and is becoming a health and safety risk with more cyclists and the environment is increasingly coming under pressure. For example access along Okaia Stream with wildlife corridors connecting to other areas of green space and indigenous biodiversity would enhance kinloch. Let's enhance Kinloch's value as a sustainable community, where the enhancement of biodiversity and urban forest is valued for future generations and all the values that it brings, such as health and well-being, reduction in climate and natural hazard risks, biodiversity, cultural values, green blue infrastructure, and much more.	
Don't loose the community spirit and atmosphere that makes Kinloch a jewel in the area. Still a little "backwater" haven.	
Shade trees planted along the beach area	
Need another restaurant/bar	
Judder bars along lisland drive as speed is a factor!	
We bought in Kinloch for the "small village" vibe and amazing recreational activities. While I understand some services are now required due to growth (supermarket/minimart, service station etc) I would hate to see it lose its charm of being a very simple place - I don't care for beautification etc, the views and lake speak for itself.	
A pub not just tipsy trout.	
I would love to see the development of the bridle trails for horses to be more extensive to provide for our rapidly growing equine community. Thank you for the existing one however it is small and limited and it would awesome to have more of these tracks available in our area. ☺. We absolutely love living near Kinloch and everything that has been developed here. Thank you to all those who work to make Kinloch the special place it is.	
Kinloch is already beautiful. Don't think it needs to spend its money on becoming more beautiful but community is what stands out. Anything that can foster this would be great.	
Keep Kinloch small and for the residents ! Not outsiders, keep the small village feel alive. Please don't make Kinloch the north island wanaka	

41



First name: Jane

Last name: Penton

Age:

55-64

Gender:

Female

Ethnicity:

HEARING: Let us know if you wish to speak at a hearing and your preferred location. *

Yes

Additional requirements for hearing:

Feedback

Do you have any other feedback?

I would like to comment on Climate Change issues facing Aotearoa and local challenges as well. We are well positioned as a district to lead by example regarding promoting eco/sustainable development and eco-friendly transport.

Water conservation and waste reduction is also critical and we should be incentivising this through policy and community engagement and education. All of this requires appropriate budgets.

Key messages should be promoted in all Council documents and I see a fundamental lack of direction in this plan regarding climate change initiatives.

I ask that Climate Change issues be front and centre of the Annual Plan document.

The effects of Covid and the current economic climate will be eclipsed by climate change in the near future if we don't act now.

Attached Documents

File
No records to display.

41

42



First name: Marion

Last name: Mallard

Age:

55-64

Gender:

Female

Ethnicity:

HEARING: Let us know if you wish to speak at a hearing and your preferred location. *

I do NOT wish to speak in support of my submission and ask that the following submission be fully considered.

Feedback

Investments projects – Do you agree with these changes?

Do you have any comment to share with us?

Generally speaking, I think that the money from the "beautification" could have been spent on more urgent issues such as water and sewage pipes, recycling, proper surfacing of our main streets. In detail: Please clarify Tauhara Ridge/Lake terrace crossing as I have not found the spot.

Council has updated some of its fees and charges and made some changes to how they are structured.

We provide a wide range of services and functions to the community that carry costs. Some of these costs are paid for out of general or targeted rates and others are recovered from government. However, where a service or activity benefits an individual customer (e.g., a dog registration benefits an individual dog owner, or a resource consent benefits the individual applicant), Council applies a fee to cover the cost of delivering that service. Read more [HERE](#)

Overall, do you agree with these changes?

Do you have any comment to share with us?

Solid waste cost – I see that you increase to cost! Knowing humans this will not improve the behavior of people as to throwing things just willy nilly wherever they are (see roadsides) or putting recyclable stuff into the landfill or landfill rubbish collection. Generally, proper recycling/separating should be encouraged not stopped! Many people will not be able to afford the increased cost and, well, you know what will happen then! It needs to be something people actually WANT to do! Therefore, it ought to be affordable, practicable and easy to do. Also, the council should look into increasing the plastics that get recycled. We need to do the very best for the environment, not just for us, children or future children but also for the visitors (tourists and otherwise).

42

Do you agree with these criteria?

Do you have any comments to share with us?

With regards to the town center rates, please bear in mind that a lot of them already are in trouble because of the COVID Situation! Some landlords were not very understanding, and people are struggling. If you increase the rates, at least help those that cannot afford them to move somewhere else, eg. With moving, finding a location etc etc.

Do you have any other feedback?

I just saw the litter infringement in your documents – well, first of all, I don't think they are high enough (to deter from doing it) and I am not sure exactly how this is enforced. Are there in fact council personnel walking around t watch? How do you find the perpetrators to be able to infringe them!!!

Attached Documents

File
No records to display.

43

**Organisation:**

Mangakino Pouakani Representative Group

First name: Lisa**Last name:** de Thierry**Age:****Gender:****Ethnicity:****HEARING: Let us know if you wish to speak at a hearing and your preferred location. ***

I do NOT wish to speak in support of my submission and ask that the following submission be fully considered.

Feedback

Investments projects – Do you agree with these changes?

Do you have any comment to share with us?

The Mangakino Pouakani representative Group would like to see all Lake Front developments, including the playground carried out in Year 2 of the LTP and once the Development Plan has been completed. Request that the Basketball court with funds (\$100k approved) that was set aside, increased to \$120k due to the change in climate to source concrete also carried out in Year 2.

Attached Documents

File

PDF - Annual Plan Submission - Mangakino Pouakani Representative Group

**Submission to the Taupō District Council's Annual
Plan 2022-2023
By Mangakino Pouakani Representative Group**

To: Taupō District Council
Private Bag 2005
Taupō 3352
annualplan@taupo.govt.nz

1.0 SUMMARY

Council's Annual Plan outlines the services, key projects, and initiatives Council intends delivering for our community in the coming financial year. The Annual Plan consultation document sets out some key projects/proposals which have changed since the adoption of the Long-term Plan.

The Annual Plan includes five key projects:

Changes to the capital expenditure programme.

Aligning the local water schemes.

Updates to some of Council's fees and charges.

Significance and engagement policy.

Towncentre Taupō management rate.

Scope of activity

1. Providing local input into the development of Council policy that will impact on the MP ward.
2. Maintaining an overview of service delivery, operational and capital expenditure, within the MP ward. Providing local input into the development and review of Council's key planning documents such as the Long-term Plan, Asset Management Plans, Structure Plans, Reserve Management Plans and the annual plan
3. Preparing an annual submission to Council's budgetary process for expenditure within the community
4. Considering and reporting on all matters referred to it by Council or any matter of interest or concern to the ward.
5. Communicating with the MP community, community organisations and special interest groups within the MP ward.
6. Exercising Council's statutory regulatory functions under the following Acts and Regulations (and any amendments) that are not elsewhere delegated to staff and that relate to matters in the Mangakino/Pouakani ward:
 - Local Government Act 1974 – Part 21
 - Land Transport Act 1998
 - Reserves Act 1977
 - Local Government Act 1974 – Section 319 - Road Naming

7. Considering resident and ratepayer appeals to decisions made in accordance with Council's Tree and Vegetation Policy affecting trees and vegetation in the Mangakino/Pouakani ward.

2.0 BASKETBALL COURT DEVELOPMENT

Support the decision to build a full-size basketball court. However, the location site for the court needs to be changed. Location changed from old shop footprint changed to adjacent to existing gym. Due to the change in the building space and the cost increases for concrete the total budget required would need to increase from \$100k to \$120k. This would include some noise screening.

3.0 WAIRENGA ROAD FOOTPATH INSTALLATION

Support the installation of a footpath on Wairenga Road.

4.0 MANGAKINO LAKE FRONT DEVELOPMENT

4.1 Support the decisions made in the Long-Term Plan

4.2 Support to bow wave the funds to next financial year

4.3 Support the implementation of a Development Plan for Mangakino

5.0 OTHER

The Mangakino Pouakani Representative Group is disappointed with the lack of funding for local rural roads from Waka Kotahi. Rural communities contribute a lot in taxes that go towards the maintenance of roading and to hear that no funding for the district was approved for funding was very disappointing.

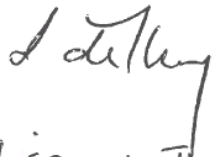
CONCLUSION

The Mangakino Pouakani Representative Group would like to see all Lake Front developments, including the playground carried out in Year 2 of the LTP and once the Development Plan has been completed. Request that the Basketball court with funds (\$100k approved) that was set aside, increased to \$120k due to the change in climate to source concrete also carried out in Year 2.

Thank you for the opportunity to make this submission.

DATED 12 April 2022

Mangakino Pouakani Representative Group


Lisa de Thierry

44



First name: Laura

Last name: Dawson

Age:

65-74

Gender:

Female

Ethnicity:

HEARING: Let us know if you wish to speak at a hearing and your preferred location. *

I do NOT wish to speak in support of my submission and ask that the following submission be fully considered.

Feedback

In our consultation document, we set out how Council's decision on whether to modify the delivery timeline of a project will be guided by the criteria below.

1. the need to maintain a balance across the four pillars of well-being – cultural, environmental, economic, and social
2. prioritisation in line with the eight strategic priorities that we identified and developed as part of the LTP
3. resource considerations such as the availability of materials, contractors, and appropriately skilled staff

Read our Consultation document [HERE](#)

Do you agree with these criteria?

Do you have any comment to share with us?

Introduction: I recognize Council needs to run a very tight budget. A retiree living on a fixed income, I know the National Super has increased by 5.95% from 2021 to 2022. Council needs to recognize there are many Taupo District residents in a similar situation and reduce 2022 -23 rates increase to NO MORE THAN 6% INCREASE.

Transport projects – Do you agree with these changes?

Do you have any comment to share with us?

No need to include Huka Falls footpath, it is funded by Waka Kotahi. No to \$1.19m.

44

Town Centre Transformation - stay within budget and funding received from central government. No to \$2.0m.

Waikato Bridge Investigation - There have ben several investigations in the past, look at previous work done. Not to \$300k.

Community facilities projects – Do you agree with these changes?

Do you have any comment to share with us?

New neighborhood reserves are the developers responsibility remove \$13m.

New Library books YES include \$3.4m.

Town Centre Transformation - as for above, No to \$2.4m.

Investments projects – Do you agree with these changes?

Do you have any comment to share with us?

Civil Admin fitout no to \$4.9m - delay till building complete.

Waiora House Rebuild YES to \$5.9m Maximum.

Attached Documents

File
No records to display.

45



First name: Dick

Last name: Reaney

Age:

Gender:

Ethnicity:

HEARING: Let us know if you wish to speak at a hearing and your preferred location. *

I do NOT wish to speak in support of my submission and ask that the following submission be fully considered.

Feedback

Solid waste projects – Do you agree with these changes?

Strongly disagree

Do you have any comment to share with us?

Absolutely NO to this tax. It is totally unnecessary and not based on proven science. Remember the IPCC is not certain they are right, even in their 6th report they are only 90-95% committed. So before we go spending billions of dollars on a flawed hypothesis, hold back until there is certainty one way or the other - there is no need for panic, the world won't end and there is no emergency. There is no empirical scientific connection between climate events and carbon dioxide. There never has been and never will be - look at history, climate has always produced catastrophic events, the history books are full of them. Do you accept humans can cause volcanic eruptions!!!! I think not. Please act sensibly on this one.

Attached Documents

File

No records to display.

46



First name: Colin

Last name: Morrell

Age:

Gender:

Ethnicity:

HEARING: Let us know if you wish to speak at a hearing and your preferred location. *

I do NOT wish to speak in support of my submission and ask that the following submission be fully considered.

Feedback

Transport projects – Do you agree with these changes?

Do you have any comment to share with us?

In the first instance I would query why "Waka Kotahi hasn't funded as planned"...the several roads requiring road safety and improvements. If these roads as identified come under the category of subsidised roading works then why are they not now being met? If it is because they no longer meet the threshold of subsidy or funds are now not available, then the work should be postponed as the Council should similarly take the view that it cannot afford to do the work this year...so postpone it until another year. I submit accordingly

Community facilities projects – Do you agree with these changes?

Do you have any comment to share with us?

"We are proposing a top-up of \$4 million of Council funding to ensure we achieve the full aims of this project. This is a once in a lifetime opportunity to transform our CBD into a world-class area we will all be proud of". We simply cannot afford this this year. Why wasn't this \$4 million of work included in the original shovel ready cost estimate which the Government then picked up? It would appear to me that the Shovel Ready project funded by Government has been completed as planned and that perhaps the original estimate was wrong or more likely the Council no wants to go beyond the original shovel ready plan just so that our CBD will be turned into a world-class area we will all be proud of. I believe and I submit that the general ratepayer population of the Taupo District is already proud of what we have and that whilst an extra \$4million MAY enhance the CBD further, we cannot afford it in this current economic climate indeed is it even essential or is it "like to have?" I submit that this work should also be deferred this year or at least halve the budget for this year.

Investments projects – Do you agree with these changes?

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Do you have any comment to share with us?

In the first instance is the Council satisfied that the ratepayers support the plan as proposed for a new building? With that in mind what is the proposed programme for the construction of the building and will it be sufficiently constructed in 2022/23 to warrant/justify the full fit-out cost as proposed ie \$2.5million? Maybe Council and its partner should consider delaying the construction for another year and therefore avoid the need for \$2.5million this coming year. After all Council's functions are adequately housed I'm sure for the following year and the lease payments are already budgeted for. I therefore submit that the planned construction be deferred with the fit-out cost of \$2.5 million also deferred.

Do you have any other feedback?

In setting a proposed rate increase of 8.35% I submit that Council has NOT "balanced affordability" especially if when all the other current financial affects are weighed up that also effect ratepayers affordability. Of course Council is aware of everything else affecting ratepayers and the public in the current economic environment and I accept that Council will have taken these into consideration when determining what the extent of it's capital investment programme will be/what it wants to achieve in 2022/23. However, for the record I just want to note what everybody in NZ is confronted with this coming year and indeed are already being confronted with:

- Cost of Living - NZ is currently confronting a cost of living crisis (supported by the Prime Minister and Government in general) and this is having a massive bearing on individuals ability to sustain a quality of life and the ability to pay for essentials let alone extras. We all know that people are having difficulty in paying rents, buying essential food items, paying utilities etc. Rate increases will only exacerbate the ability to meet outgoings for property holders/owners plus landlords.

- Annual rate of inflation - at 5.95% to 31 March 2022 this is fueling the COL and the ability to meet sustain an equitable standard of living/quality of life.

- Fuel costs - the cost of a litre of petrol or diesel has skyrocketed to unheard of prices. Although the Government has cut fuel tax by 25cents per litre, that is really only a drop in the bucket when you consider the cost of filling your tank.

- Power - the cost of power is to surge this year and that will also impact the ability to retain a standard of living. Some users will experience greater increases than others.

- Rentals - our rentals are already one of the highest in the western world and is having an effect on renters being able to stay in their properties and also affects their general cost of living. Landlords will be forced to increase rentals where significant rate increases occur.

- Interest rates - Interest rates are now on the rise and all ratepayers/landlords with a mortgage will feel the effect of these increases as and when they renew their mortgages. Such increases have a flow on effect on their cost of living.

Council has a responsibility to ensure the wellbeing of its ratepayers/residents and in that regards must make all efforts to ensure that living in the Taupo district is affordable to all. I submit that at the current level of rating in the Taupo District the District will become, indeed I suggest has already become, a District whereby only those who can afford to live in it will be able to. I fear that the level of rates will force people out of the Taupo District but more particularly those on fixed incomes and those with high end mortgages.

What was forecast for the 2022/23 rate increase ie 7.35% was so forecast without the knowledge I believe of how the cost of living has taken off, without the knowledge of the effect on fuel costs brought about by the Russian invasion of Ukraine and without the knowledge at the time of the

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increase in in inflation. I an ideal world without all of these economical affects a 7.35% increase as forecast MAY have been affordable BUT now 7.35% let alone a proposed reassessed 8.35% is NOT affordable under the current climate.

Attached Documents

File

No records to display.

47



First name: Chas

Last name: Thorburn

Age:

Gender:

Ethnicity:

HEARING: Let us know if you wish to speak at a hearing and your preferred location. *

I do NOT wish to speak in support of my submission and ask that the following submission be fully considered.

Feedback

Do you have any other feedback?

Proposed new rate on Carbon emissions - I am writing to advise the Council to scrap the above. It is complete nonsense. It has never been proved that human emissions of carbon dioxide drive global warming. Carbon is a plant food and vital to our survival. it is not a pollutant, and if anything, we need lots more of it than less. I suggest you read "Heaven and Earth" and "Green Murder" by Ian Plimer, one of the world's most eminent Geologists. He states facts not lies that come from the IPPC. It seems to me you are looking at taxing us on a crazy whim.

Attached Documents

File
No records to display.

48



First name: Greg
Last name: Rzesinowiecki
Age:
Gender:
Ethnicity:

HEARING: Let us know if you wish to speak at a hearing and your preferred location. *

I do NOT wish to speak in support of my submission and ask that the following submission be fully considered.

Feedback

Do you have any other feedback?

Refer to documents attached

Please find attached three documents;

Letter to Councils whose subject is; "Truth, Freedom, Rights and Responsibilities in the age of COVID-19" April 2022 which contains six (6) specific recommendations, and Appendices as follows;

Two evidence papers provided to the NZ Parliament Petitions Committee and the NZ Police, which we request you consider in respect to the 2022 cycle of annual and long term plans by your Council;

1. Appendix A Evidence paper and report on proposal to amend NZ Bill of Rights Act 1990 to Petitions Committee, February 2022
2. Appendix B Case to NZ Police

I apologise for the mass email, rather than a specific email for each of the 78 Councils and Authorities, plus LGNZ (for information), and trust you find this approach satisfactory.

I thank you on behalf of civil society for who's benefit this advocacy project is forwarded, for your consideration of the suggested recommendations.

Attached Documents

File
PDF - Dear NZ Regional Councils and Territorial Authorities 2022
PDF - Evidence paper Petition SC section 5A NZ BORA 1990_Final_4-2-22

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File
PDF - Case to NZ Police (final)

Open Letter To all Regional Councils and Territorial Authorities on the occasion of your Annual Plan consultation – April 2022

Dear Chair, Mayor, Councillor, CEOs and Officers in council administrations,

Subject: Truth, Freedom, Rights and Responsibilities in the age of COVID-19

I write on behalf of those who might agree with the following statement;

“We have experienced something despicable with the COVID-19 Response Measures and Vaccine Mandates”

1. Please consider this paper and associated recommendations in your 2022 Annual and or Long Term Planning process.
2. By way of introduction, I, Greg Rzesniowiecki have previously written to all regional councils and territorial authorities in 2014 and 2018 in relation to your Council's Annual and Long Term Plans identifying overarching problems and suggesting policy solutions.

Introduction

3. This formal correspondence brings matters to your Council's attention to enable proper consideration of the impact of high level criminality and its detrimental effect on the people and economy of New Zealand.
4. Covid phenomena has dominated NZ and global life and policy settings for two years. What is it really about?
5. The likely vector of emergence for the mysterious SARS-CoV-2 virus is that it's a product of the global bioweapons¹ programs and likely was deliberately released given the lockstep

¹ The link is to a video Covid Crimes – A Witness: Dr Richard Fleming; <https://galleries.vidflow.co/awitness> Dr Fleming provides context in this 54 minute video for the remainder of the content in this paper as well as explicitly identifying the evidence that the bug SARS-CoV-2 is a bioweapon and later in the interview that the mRNA vaccines are also products of bioweapons programs. Without coronavirus gain of function research done illegitimately the world would have escaped the Covid phenomena.

response managed internationally. The evidence for this case is circumstantial though well considered and offers a [plausible hypothesis](#), whereas zoonotic emergence of the bug is well discarded with available knowledge. The pangolin association is a myth and part of the official disinformation to [protect Dr Fauci](#) and [friends](#) who provided significant [funding](#) to Wuhan Institute of Virology (WIV).

6. It is important that Council on behalf of their people have a full picture of the Covid matter. To operate under false assumptions or in absence of a factual view of the data about Covid and the COVID-19 Response is potentially a fatal or life threatening decision.
7. Factual material and information within this paper proves beyond all reasonable doubt that Pfizer's COVID-19 [Comirnaty](#) gene therapy product is neither safe nor effective.
8. Criminal action is perpetrated as a result of the NZ Government's COVID-19 Response enactments, [lockdowns](#) and policy, acquiescence to, or promoting a particular ideological agenda, similar to other nation's policies (often Western jurisdictions) in respect to COVID-19 which might be paraphrased; "COVID-19 elimination and lockdown directives will drive more New Zealanders to be vaccinated." This despite the novel nature of the gene therapy mRNA product and its unknown [safety](#) profile. All care and no responsibility gone mad.
9. Who directed the NZ Government to follow the "get vaccinated or perish" policy, as opposed to, treat the ill and leave the well and healthy to get on with their lives?²
10. What is in the vaccines that it is so important to vaccinate every New Zealander down to a very young age?
11. If it was so good people would queue for it, not be whipped into taking the toxic sorcerer's brew.³

2 Parody - "I Bought Myself A Politician" - Mona Lisa Twins published August 2021
https://www.youtube.com/watch?v=QAKz_cxTlQ Serious take - long form journalism in the Columbia Journalism Review; "Journalism's Gatekeepers" 21 August 2020, by Tim Schwab about everyone's favourite computer programmer, turned philanthropist, turned vaccinologist – Bill Gates: <https://www.cjr.org/criticism/gates-foundation-journalism-funding.php>

3 US VAERS data in excess of 25,000 deaths temporally associated with the COVID-19 vaccinations as at 1 April 2022; <https://openvaers.com/covid-data/mortality> are similarly reflected in UK and European pharmacovigilance web based data platforms. Additionally NZ Medsafe CARM data as of 28 February 2022 has 156 reports of death and over 58,000 reports of adverse events many unresolved or likely terminal as a result of severe disability associated with myocarditis and more medical conditions; <https://www.medsafe.govt.nz/COVID-19/safety-report-41.asp>. Of note, it is well established in scientific literature that adverse events, injuries and death are under reported to pharmacovigilance systems.

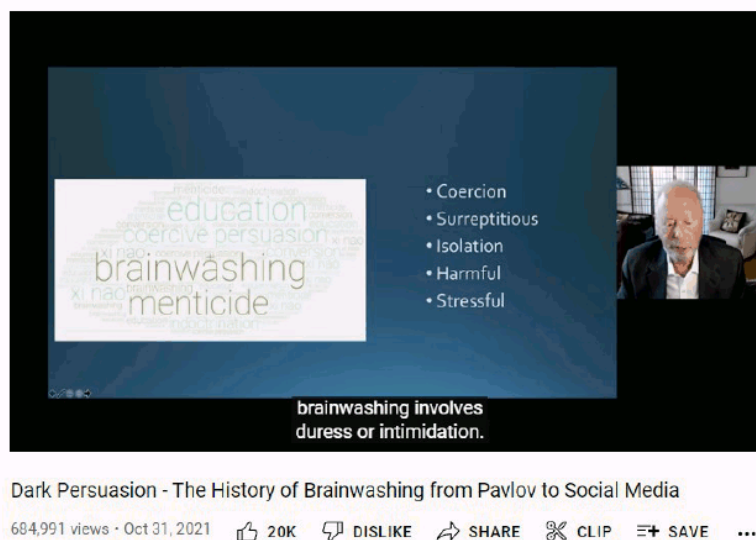
Evil flourishes where good men do nothing – Edmund Burke

It is easier to fool a man than to convince him he has been fooled – Mark Twain

On fooling the people with industrial precision

A. Brainwashing with Professor Joel Dimsdale

12. Professor Joel Dimsdale discusses his latest book “Dark Persuasion: A History of Brainwashing from Pavlov to Social Media” in the [linked video](#), which traces the evolution of brainwashing from its beginnings in torture and religious conversion into the age of neuroscience and social media. Dimsdale is distinguished professor emeritus in the Department of Psychiatry at UC San Diego.



Screen capture about 6 mins into the video on what brainwashing involves

B. Mass formation with Professor Mattias Desmet

13. "Mattias Desmet on Our Grave Situation" youtube [video](#) published 3 December 2021. Mattias Desmet, Professor of Clinical Psychology, Ghent University in Belgium,⁴ talks with Peak Prosperity's Chris Martenson about his work that connects past historical episodes of what is called "Mass Formation" (for example Nazi Germany and periods of communist control under Lenin and Stalin in USSR) and current events. Desmet's thesis suggests that unless a few brave and courageous people are willing to stand up and say "I don't agree!" history suggests that we will end up with a fully totalitarian outcome. Who is for that?

14. New Zealand's Councils might provide part of the necessary and courageous solution.

Vaccine harm is enormous and growing with every jab

15. Unfortunately it is plain the NZ Government [knew](#) of the looming vaccination carnage; that is the harm, injury and death that would flow from vaccinating New Zealanders through the Government's access to Pfizer's data made available through the requirements of [Comirnaty](#)'s Provisional Approval 3 February 2021 in its Vaccinate NZ project.

16. The NZ Government knew that significant numbers of New Zealanders would be [killed and injured](#) for the sole reason of accepting injection with the Pfizer mRNA lipid serum product.

17. The conspiracy is breathtakingly large where one acknowledges similar policies being enacted with [similar contracts](#) for [mRNA vaccines](#) in other people's nations to experiment on them.

18. When insufficient took up the mRNA injectable, the NZ Government mandated employees in chosen sectors of the economy both public and private to be jabbed or face economic ruin through termination of employment, plus driving businesses, employers and Councils to mandate their staff and limit public access to buildings and assets.

19. Post vaccination adverse reactions in NZ have already killed over 400 (confirmed on citizens [database](#)) and the number potentially killed is double that in suspected cases

⁴ Prof Mattias Desmet profile at Gent University Belgium: <https://biblio.ugent.be/person/801001743835>. Desmet has been interviewed by numerous people over the past year, as a web search would reveal: <https://www.google.com/search?q=%22Mattias+Desmet+Mass+Formation%22>

requiring further investigation - work is being done to clarify the circumstances of these deaths post jab.

20. Excess mortality in 2021 was [2000 deaths](#). The only change between 2020 and 2021 was 80% of New Zealand's adult population being vaccinated with Pfizer's mRNA gene therapy product.

21. It is reasonable to posit the post vaccination cull at over 1000 people and possibly more of the 2021 excess mortality (what other cause is there – there was no influenza in 2021 and NZ stats assure us that suicides were running at the typical ~600 per annum). If it is unreasonable to entertain such a hypothesis from this data, then it is important to at least investigate the Vaccine's toxic effects to determine the cause of an unusually high number of deaths in 2021.

22. [Medsafe safety data](#) on Pfizer's Comirnaty product declares that up to 28 February 2022 a total of 10,621,074 doses of Comirnaty have been administered and [58,135 AEFIs](#) (adverse events following injection) were reported. In the same period a total of 156 deaths were reported to CARM after the administration of the Comirnaty vaccine.

23. Reporting of adverse events leading to injury or death is not mandatory, which means CARM is not an accurate signal of the harm, but its alarm light ought be glowing red with the injuries registered to date.

24. Since 17 January 2022 NZ's Government offered COVID-19 vaccination to [476,000 children](#) between ages 5-11. Consent for children is legally determined by the guardian. That is perverse given children do not suffer much from Covid-19 symptoms, however, they will bear considerable [risk](#) of long term [injury](#) or death from Covid-19 vaccination.

Case to NZ Police

25. I wrote to the NZ Police through the agency of a specific detective officer in October 2021 offering a report; "Case to NZ Police" (attached as **Appendix B**). It outlined the Covid vaccine carnage; death, injury and destruction perpetrated to then ~270 deaths and 1000 serious injuries temporally associated with Vaccination. The report identified evidence of breaches of the Crimes Act including culpable homicide in the case of those killed.

26. The answer from the police officer was that operations management would not be pursuing any investigation into the COVID-19 Vaccination matter and further suggested that the charge wasn't culpable homicide and a charge of genocide was more likely appropriate. Further it was suggested that if one wished to pursue the matter it ought be referred to an international tribunal or court – which means the ICC International Criminal Court.⁵

27. Given the potential routes to a just solution are most likely in our own hands – it is critical that we the people of New Zealand look to our own laws, constitution and our own people power for that just solution. (See recommendations paragraphs 72, 82 and 91)

Nano structures in the Vaccines

28. [Nano structures](#) appear or grow in the Pfizer mRNA lipid emulsion product extracted directly from vials of [Comirnaty](#) – there are at least two known ingredients that are secret, however, there may be extra elements, and any synergies or processes resulting from interaction with a Vaccination host or more stimuli; electro magnetic radiation, heat; that are withheld from public knowledge or yet to emerge.

29. No one that I know of gave consent to be vaccinated with graphene oxide or similar substances seen in the mRNA vaccine vials. Graphene oxide is not regulated for human use as a medical intervention. Where these substances and structures were a known outcome of the Pfizer mRNA product and their inclusion in the Vaccine isn't disclosed to vaccine recipients, then it is *prima facie* a crime.⁶

30. No one from authority is forthcoming with any explanation in respect to the nano-scale structures despite repeated reports to NZ Ministry of Health officials, Government Ministers and NZ Police. There appears to be a conspiracy to deny and/or downplay any and all reports of deleterious elements or adverse effects associated with the COVID-19 vaccination products.

⁵ Whereas expert opinion informs that international rule of law is corrupted by the hubris of the powerful nations who use aggression with impunity knowing that they are unlikely to be prosecuted by the ICC or any other tribunal: <https://dezayasalfred.wordpress.com/2022/04/07/counterpunch-no-right-arises-from-a-wrong/>

⁶ The implications of, and consequences from nano-structures in people's blood is horrific, nay evil, where it is intended by the manufacturers and those in the COVID-19 conspiracy loop, to inject the unknowing and trusting or credulous public with more than just mRNA and its lipid carrier.

31. Already many hundreds if not thousands of New Zealanders have expired as a result of the COVID-19 Vaccination, and tens of thousands have suffered harm, injury, some might be long lasting or terminal conditions brought on by myocarditis, extreme clotting - thrombosis or strokes. Get a stroke or myocarditis as a result of a vaccination against a flu like illness? As of January 2022, the reported incidence of local and systemic side effects from mRNA was 27% in the general public – in NZ that would be about 1 million people suffering some side effect.

32. Toxins accumulate toxic effects - the more shots the more potential/real long term detrimental effects. Oncologists are noticing the onset of previously dormant cancers. The Pfizer product [distorts the immune system](#), including components that fight off cancer, to lower the resistance a vaccinated individual's body would ordinarily use to [counter](#) foreign intrusion or toxins. This may be a design element to allow the mRNA lipid minimal resistance in its path and effect in a recipient's body. Potentially permanent switches to miss a flu like illness.

33. Long term [immune system decline](#) is forecast. There is the need to study vaccination recipients for more problematic [symptoms](#) and conditions yet to manifest that might not appear in similar numbers in the unvaccinated proportion of the New Zealand and global population.

34. We Covid sceptics⁷ are learning more as we study the Covid phenomena and the ground of its emergence. Some of this publicly available information is dismissed as misinformation and or disinformation. It is noteworthy that the [ones hurling](#) the misinformation slurs prefer not to discuss or debate the content and merits of that which they denigrate. The phenomena arises from the same mentality that use the pejorative 'conspiracy theory' slur to deny facts without discussing the matter.⁸

35. From [Pfizer's documentation](#) discovered through US FOIA action against the FDA we now know that the Pfizer product has literally thousands of [adverse potential reactions](#) as

7 Only Covid sceptics in the sense of scepticism about the received wisdom and official COVID-19 narrative promoted by NZ Government and authorities and more at a global level including the WHO and UN and more national authorities in foreign jurisdictions such as the US CDC, NIH, or FDA.

8 Not wanting to distract from Covid and its implications, it is important to apprehend that NZ academia is not the happy state of scientific inquiry and discovery one might expect. Academics themselves are indicating concern at loss of academic freedom: <https://www.newsroom.co.nz/academics-divided-on-their-own-freedoms> Also in September 2019 I wrote almost 700 NZ academics forwarding an essay of my discoveries in respect to the 9/11 event – pointing to the false flag and inside job nature of that crime from the perspective of the available public information only to receive not one response other than “out of the office” type automatic returns. The 9/11 essay

these are already observed in recipients or projected to arise.

36. From what is known about the mRNA products begs the question; “how anyone can give proper informed consent to the Comirnaty injectable product and boosters,” as clearly none were properly informed of the harmful and fatal potentials arising from the full dynamics of all the ingredients and their interface with individual human cell tissues in vital organs like brains, hearts and gonads in those who are Vaccinated.

Variation in Pfizer mRNA vaccine batches

37. The [lethality of batches](#) or lots of Pfizer and Moderna (and others) COVID-19 vaccination products varied, indicating malfeasance, or where unintended then criminal negligence. NZ does not check the contents of the vials other than maintain and audit their chain of custody and the associated documentation.

Pfizer Comirnaty is not safe - nor is it effective

38. All scientific evidence shows that whether a person has taken one, two, three or zero mRNA shots makes no difference to whether they can catch SARSCoV2 nor whether they can infect others with it. Recent Lancet articles [prove](#) this [conclusively](#). Additionally data from the current epidemic in NZ point to the [lack of efficacy](#) of being vaccinated. Add to its ineffectiveness, the carnage and harm its deployment has caused, for a perspective about the lengths NZ's Government has gone to promote an unsafe novel product.

39. Manufacturers of the mRNA injection have never claimed that it stops infection or transmission of SARS-CoV-2. In fact, it was never designed to do it, or tested for it.

40. The number of people needed to [vaccinate](#) (NNTV) to prevent one infection is extremely large and astronomical to prevent one COVID-19 death.

41. COVID-19 [morbidity](#) is about that of a serious influenza season and is [treatable](#) using

for your spare time reading which none have refuted or rebutted: https://values-compasspointsinapostruthworld.blogspot.com/2019/09/nz-academy-911-militarism-climate-will_11.html If Empire can lie the world into war based on the 9/11 crime lie, then it can lie the world into accepting experimental mRNA gene therapy products for profit and whatever other agendas – none benign.

relatively cheap generic drugs. Early treatment of any serious symptoms of COVID-19 infection using all available remedies and therapeutics is superior to the NZ Government determination to vaccinate everyone.

42. Natural [immunity](#) is superior to any COVID-19 vaccine induced immunity.

43. People who accept the COVID-19 vaccine are as likely to become infected with the disease and transmit it. Vaccination drives variant selection to evade vaccines.

44. So far and according to the NZ Government's statistics with COVID-19 daily infections of thousands per day since late February, [MoH data](#) as of 6 April (link is archive of 5-4-2022 data) has a total of 741987 people have become infected including 82,682 active cases and 426 (or 456 - count with broader parameters) died with COVID-19 (and often more confounding medical conditions).

COVID-19 is no more deadly than influenza

45. About 400 to 450 people die as a result of respiratory infections and associated distress upon their preexisting conditions in influenza seasons and these generally fall in that winter and associated flu/cold season, an annual cull of the vulnerable and susceptible observed in statistics and from a study of human excess mortality. More die during a serious influenza season such as 2019. Each year 600 die by suicide.

46. NZ spent tens of billions running from the Covid pandemic, delayed for two years to Vaccinate the willing, coerced and those forced or blackmailed (loss of job) to take the clotshot, with a [product](#) that doesn't protect against infection.

47. Has NZ's COVID-19 Response aided in reducing mental health problems, or, has it exacerbated mental health and anxiety problems in the population – these are some of New Zealand's most vulnerable people. Pushing the precariat into destitution through Covid economic vandalism for two years is not economically nor morally smart.

48. The leading causes of [death](#) in 2019 were cancer, ischaemic heart diseases and cerebrovascular diseases (with 110.5, 47.0 and 21.5 deaths per 100,000 population respectively).

49. Applying the same statistical proportions to those who “died from or with Covid-19” in NZ since the pandemic's commencement in 2020, would reveal that less than ten (10) per 100,000 of the population died from/with Covid-19 to date. A death rate of 10 per 100,000 would translate to a few more than 500 deaths for New Zealand's population of 5 million. NZ's 2022 Omicron epidemic might close at 600 deaths (similar to influenza season) before NZ moves to the winter influenza season. That will be one to watch.

50. Suicide statistics are over 12 per 100,000! Cure that also – in curing suicide we would necessarily ease a lot of pain and create a more egalitarian social system, where economics and commerce would align with real human needs. See my [recommendations](#) to your 2018 Annual Plan process.

COVID-19 Response measures are social and economic vandalism

51. Many people who were in sound social and economic positions have had their livelihood stripped or severely throttled. Recall the increase in dairy farmer suicides as they had their price of milk product recession mid last decade. I imagine a similar cull is underway in light of vandalism done to the general economy from official COVID-19 Measures particularly Auckland mixed business, retail, hospitality with thousands closing.

52. NZ was once noted for its friendliness and warm welcome, whereas, the COVID-19 Response has divided the nation from the world, divided the nation, divided people in its streets and families – *great job if one's object is to tear society apart with fear*

The basis for policy ought be evidence and data not hearsay and ideology

53. Why did some Councils adopt discriminatory policies against constituents on the [unscientific](#) basis presented by the government's Traffic Light system for supposed control of a inconsequential disease in NZ?

54. With the so-called Omicron epidemic the NZ Government is lowering restrictions despite record case numbers. What possible logic was there in restricting New Zealanders when there was no COVID-19 in the community, except to coerce them to be vaccinated?

55. Did the many NZ councils and territorial authorities that applied or continue to apply a medical apartheid system upon their constituents through arbitrary action, such as; “no jab no access” consider their human rights obligations in law?

56. Medical apartheid was imposed without recourse to any democratic process, or consideration of basic human rights as outlined in the NZ Bill of [Rights](#) 1990 (BORA) or the International [Covenant](#) on Civil and Political Rights (CCPR) to which NZ has acceded.

57. The CCPR articles 4 and 7 need to be comprehended in the current Covid-19 matter;

Article 4 part 2. No derogation from articles 6, 7, 8 (paragraphs 1 and 2), 11, 15, 16 and 18 may be made under this provision.

Article 6 part 1. Every human being has the inherent right to life. This right shall be protected by law. No one shall be arbitrarily deprived of his life.

Article 7 No one shall be subjected to torture or to cruel, inhuman or degrading treatment or punishment. In particular, no one shall be subjected without his free consent to medical or scientific experimentation.

58. We offer facts based on evidence and data. Why did normally intelligent people and councillors or council administrations take draconian measures to deny citizens the right to access council facilities to which they are entitled - many being ratepayers?

59. Are those vaccinated and harmed as a result of the mandated medical intervention to seek redress from Council and or other mandating authorities, businesses and employers? Where an authority injures a person as a condition of work, surely they are liable for the harm caused? Where it is death is it a culpable homicide – manslaughter.

60. Councils breach their fiduciary contract with ratepayers where they deny individuals access, particularly on such spurious grounds.

Greg Rzesniowiecki and previous forays into long term plans

61. Greg has previously written to all regional councils and territorial authorities in 2014 and 2018 in relation to Councils Annual and Long Term Plans;

2014

62. In 2014, I wrote on behalf of the Renewables, a Motueka based Climate Action group, who held an active interest in New Zealand's ability to mitigate Climate Change. The Renewables 2014 [correspondence](#) focussed on the TPP (Trans Pacific Partnership) Free Trade Agreement negotiations.

63. As a result of our efforts people in a variety of NZ Councils' constituencies mobilised and lobbied their councils to adopt the TPP Policy Solution, twelve (12) councils from the smallest in South Wairarapa to the largest Auckland who initiated the policy.

64. With the lack of transparency and secrecy in respect to the contract for the supply of the Pfizer gene therapy injectable product it is difficult to determine whether the Pfizer COVID-19 Comirnaty product is supplied by Pfizer NZ, or a foreign Pfizer corporation – to ascertain whether the contract is subject to the CPTPP framework treaty and legislation.

65. Nevertheless, we know from other contracts with Albania and more nations that [contract disputes](#) shall be governed by the Laws of the State of New York, USA and attempted assignment of rights or delegation or subcontracting of duties without the required prior written consent of the other Parties shall be void and ineffective.

2018

66. In 2018 I wrote Councils with some proposals about governance and [wise policy](#) setting to ensure certain adverse areas of politics and hegemony under imperial decree or direction were to be avoided or countered through use of the “rule of law” as an instrument to establish just outcomes. Alas those proposed policies did not see any serious light of day, though their general adoption might have led to better outcomes in the recent period.

Where available elegant policy solutions to problems are not adopted that non adoption might be unjust and against the “common rights” of individuals and their

societies.

Observations, Conclusions and Recommendations

Amend Sec 5 of the NZ Bill of Rights to make the “Life and security of the person” sacred!

67. I am increasingly of the opinion that the only authority that can counter corruption is enforceable rule of law at a local, national and [international](#) level. However, the institutions are themselves corrupt.

68. The highest law making body in the land is the NZ Parliament comprising the 120 Representatives and the Commander in Chief, NZ's Governor General. Might they listen?

69. I have an active [petition](#) before the NZ Parliament's Petitions Committee seeking an amendment to protect and make sacred our rights and freedoms in sections 8, 9, 10 and 11 of the New Zealand Bill of Rights 1990 (BORA) under the heading “Life and security of the person.”

70. The petition was sponsored by ACT leader David Seymour and read in the House 14 December 2021.

71. I provided the Petitions Committee with a substantial [paper](#) ***Evidence paper and report on proposal to amend NZ Bill of Rights Act 1990 to Petitions Select Committee 1 February 2022*** setting out my comprehension of the law and the evidence in respect to the COVID-19 pandemic and the science which demonstrates the unlawful nature of the NZ Government's official response. (A pdf copy of the paper is attached at **Appendix A**)

72. I strongly recommend that Council makes some resources available to study the Sec 5A petition paper and its implications for NZ and its citizens. Many of the statements I make in this paper to Councils rest on evidence discussed in that more complete expose.

Recommendation 1: Council studies the evidence contained in the paper to the Petitions Committee and this paper and consider recommending to local

Parliamentary Representatives and the NZ Parliament that they accept the petition and enact the suggested amendment adding a new Section 5A to NZ BORA.

A public inquiry into the COVID-19 matter is imperative

73. Earlier in this paper I reference science which studied the Pfizer mRNA product extracted directly from a Comirnaty vial under microscopy. The observed nanoscale structures form after exposure to a trigger such as heating, radio frequency radiation or an interaction with the microscope slide surface or other substance. The structures form as the lipids presumably holding the mRNA come out of suspension in the serum in response to heating or stimulation (body heat from being injected into a warm living body).

74. The nanoscale structures grow in geometric forms with apparent right angle connections and continue to grow where conditions allow it. Informed speculation is that the main composition of the structures is the controversial compound molecule graphene oxide. Where Pfizer and others include graphene oxide in their products for vaccination of our people and fail to inform the recipients of the intervention a crime is committed. The people of NZ and the planet need to determine who is ultimately liable. In NZ the question is whether Pfizer or the NZ Government or both in collusion are liable for the crime, so conspiracy to injure and kill.

75. The scale of the undertaking by the perpetrators is extreme with billions of people injected repeatedly with the sorcerer's brew.

76. How did it come to this? We better find out properly with a transparent inquiry.

77. It is imperative that an adequately resourced, public, transparent, jurisdictionally competent commission of inquiry into the COVID-19 pandemic and official response is undertaken with terms of reference that ensures there are no limits to its power to gain disclosure, including to the NZ - Pfizer contracts for supply of Comirnaty.

78. A Royal Commission might be appropriate provided the terms of reference are broad enough to allow a full investigation including facilitating public disclosure of all actions of NZ's Government, Ministries, public servants, mainstream media, selected academics, local

and foreign corporations and any other parties who had a bearing on the direction of the COVID-19 pandemic, its origins and any undisclosed agendas at work favouring one course of action over others.

79. Any COVID-19 public inquiry must fully assess the adequacy of the safety processes for the release of novel or new medicines and consider the pharmacovigilance measures employed to capture any concerning safety signals in respect to the Pfizer and other COVID-19 vaccinations and any new therapeutics advanced as COVID-19 cures.

80. The COVID-19 public inquiry must undertake its own independent analysis of the Pfizer and more COVID-19 injectable products to determine the full contents of a range of vials from diverse batch lots. The diverse selection is required because of the already well known variance in the lethality of COVID-19 mRNA injectables including Pfizer's product amongst the varied lot and batches of vials.

81. The COVID-19 public inquiry must address how and why effective cheap generic antiviral remedies and therapies were banned and denied to symptomatic COVID-19 patients.

82. The COVID-19 public inquiry must address why the existing institutions; NZ Police, NZ Judiciary, NZ professional and academic bodies including statutory bodies such as NZ Medical Council and NZ Nurses Council were unable to resist being fooled or were willing accomplices in the Covid vaccinate the planet with mRNA product conspiracy.

Recommendation 2: Council supports the initiation of an adequately resourced, public, transparent, jurisdictionally competent commission of inquiry into the COVID-19 pandemic and the NZ Government COVID-19 Response be undertaken with terms of reference that ensures there are no limits to its power to gain disclosure, including to the NZ - Pfizer contracts for supply of Comirnaty.

WHO to get more power to declare pandemics under a new global pandemic treaty – what could go wrong?

83. New Zealand along with many other nations sponsored a resolution to the World

Health Assembly (WHA) calling for the negotiation of a [new pandemic treaty](#). The draft resolution went to the WHA November 2021 meeting where it passed.

84. New Zealand is already a party to the [International Health Regulations](#) (IHR) 2005 adopting them from 2007.

85. There has been much criticism of the WHO role and lead in the COVID-19 pandemic. A proper inquiry is needed to apprehend what has gone right amongst all the things that have gone wrong or were wrongly advised to nation parties to the WHO organisation. It is problematic to develop a new global pandemic treaty absent any comprehension about need, intent or agendas driving the new proposal, nor without knowing what went well and wrong and why with WHO's global COVID-19 Response including directions or advice to NZ Government.

86. If the NZ COVID-19 Response outcome is any guide, NZ and more nations might be better off not party to any treaty that binds NZ to particular actions without any democratic input from NZ's citizens and a proper and transparent discussion of the costs and benefits of any action. Censuring dissent is the path of would be dictators or dictatorial regimes whether totalitarian or populist.

87. Was it the NZ Government's intent in March 2020 to lockdown NZ and maintain an elimination strategy until a COVID-19 vaccine was available, without knowing either the efficacy or safety profile of the resultant vaccine? Or was the vaccine component of the NZ Government response developed afterward?

88. Given we know the vaccine is neither safe nor effective, (a thousand dead from adverse reactions and Omicron ripping through the vaccinated population) how does one score the NZ Government response? Is two years of fear driven elimination a good policy option? Delaying COVID-19 infection has served no useful purpose and at huge cost.

89. Is [WHO](#) a trustworthy organisation? Unless we study the Covid phenomena and WHO's role we cannot determine an answer and ought not place blind faith in its directions.

90. Will a WHO Pandemic Treaty provide more ability for the NZ democracy to work out a policy response to a future pandemic or will the treaty likely deliver an arbitrary, politicised, profit driven, mRNA vaccine centric, and potentially [ill-fated outcome](#) similar to the global COVID-19 Response.

91. Will a future WHO Pandemic Treaty also ban the use of other therapeutics and generic off label medicines with proven efficacy in dealing with and alleviating respiratory and viral infections? WHO compromised trials in regard to the efficacy of [ivermectin](#) during the pandemic. Why on earth would NZ agree to such chicanery other than to maximise big pharma profits?

Recommendation 3: Council oppose NZ's participation in any WHO pandemic treaty which causes NZ's Government to act arbitrarily, undemocratically, unscientifically, unethically or derogate from common rights including the rights and freedoms provided in NZ's Bill of Rights Act 1990.

Recommendation 4: Council conveys its support for the propositions to the NZ Parliamentarians paying particular attention to the MPs who service your city, district or region.

Recommendation 5: Any Council continuing COVID-19 Measures ought cease forthwith.

Recommendation 6: Council considers promoting these materials to its constituency so as to ensure more New Zealanders are informed in respect to the facts and science of the Covid phenomena.

Ends..

Appendix A Evidence paper and report on proposal to amend NZ Bill of Rights Act 1990 to Petitions Committee, February 2022

Appendix B Case to NZ Police October 2021

**Evidence paper and report on proposal to amend NZ Bill of Rights Act 1990 to
Petitions Select Committee 1 February 2022**

**In the matter: Petition of Greg Rzesniowiecki: Amend Section 5 and add a new
section 5A to the NZ Bill of Rights Act 1990**

Introduction and summary

- The petitioner addresses New Zealand and international law as it relates to NZ's Bill of Rights Act 1990 and any justification for derogation from the rights provided in sections 8, 9, 10 and 11 under the heading; "Life and security of the person."
- Law is both written and unwritten. Written law provides sufficient explanation to assert that there is no justification to derogate from the right to life and security of the person in the context of the COVID-19 pandemic.
- The paper gives some consideration to recent High Court and the Court of Appeal judgements with respect to COVID-19 matters and the respective Judges' interpretation of the law.
- The Court of Appeal decision in the **Andrew Borrowdale vs the Director General of Health** case clearly upholds the **International Convention on Civil and Political Rights** (ICCPR) article 4 non-derogation against certain rights; "*Certain rights may not be derogated. The rights in the ICCPR that are treated as being sacrosanct include the rights to life, religion, and freedom from torture and slavery... For completeness, we record the rights contained in the NZBORA include the right in s 8 not to be deprived of life.*"
- The **Universal Declaration on Bioethics and Human Rights** (UDBHR) articles 1-6 uphold certain rights including article 6 the right to free and full consent in the following contexts;
 - "*Any preventive, diagnostic and therapeutic medical intervention is only to be carried out with the prior, free and informed consent of the person concerned, based on adequate information*" and;
 - "*Scientific research should only be carried out with the prior, free, express and informed consent of the person concerned*" and;

- *“In no case should a collective community agreement or the consent of a community leader or other authority substitute for an individual’s informed consent”.*
- The petitioner addresses the question; “Is the COVID-19 Vaccine rollout an experiment?” FACTS support the conclusion that it is experimental.
- The petitioner addresses the question; “Is the COVID-19 Vaccine rollout promoting a “safe and effective” treatment? FACTS support the conclusion that it is NOT SAFE nor is it effective at preventing infection or transmission.
- The petitioner finds it disturbing, that the FACT of the serious risks of the COVID-19 Vaccines, whilst known to the NZ Government, were not provided to the citizens.
- The petitioner is also dismayed, that the Government’s duty to care, for COVID-19 patients was compromised, through a refusal to facilitate early treatment, with cheap generic, and off-label drugs (including anti-viral and anti-inflammatory medicines), with known safety profiles, which have been used to great effect in other jurisdictions.
- The Petitioner finds that the NZ Government COVID-19 Vaccine rollout and the Orders and Legislation forcing people to be “Vaccinated” engages each of BORA sections 8,9,10 and 11. This is contrary to the spirit of BORA and the Law articulated in the non-derogation articles in ICCPR and UDBHR.
- The petitioner finds that the NZ Government COVID-19 Vaccine rollout as constituted is unlawful. Were the existing LAW applied properly, this proposed amendment to section 5 BORA would be redundant.
- Given the foregoing is FACTUAL, it is appropriate and necessary that the Petitions Committee recommend that the NZ Parliament, enact the Petitioner’s proposed amendment to section 5 BORA, to make the LAW clear and to dispose of any contemporary or future incorrect interpretation, that usurps non-derogable and inalienable human rights.
- The Petitioner makes other observations and recommendations in this paper. which the Petitions Committee and NZ Parliament may consider parallel to the primary matter of amending section 5 of BORA as petitioned.

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I Petition the House:

1. The [petition](#)¹ in my name, requests that the House amend Section 5, and add a new Section 5A, which would state (proposed amendment in **bold**):

5 Justified limitations

*Subject to section 4, **and section 5A**, the rights and freedoms contained in this Bill of Rights may be subject only to such reasonable limits prescribed by law as can be demonstrably justified in a free and democratic society.*

5A Unjustified limitations

None of Sections 4, 5, 6 provide any justified limits on rights and freedoms contained in sections 8, 9, 10 and 11.

2. Any alteration to the Bill of Rights 1990 (BORA), would be a constitutional adjustment, or amendment, as it is apprehended that NZ BORA is integral to the [lawful](#)² foundations in checking, regulating and balancing the application of power by the Crown.
3. Note: NZ BORA is a partial restatement of constitutional rights, already entrenched in New Zealand law, by virtue of the Imperial Laws Act, constitutional fragments, and unwritten conventions, that contribute to the New Zealand constitutional framework. Moreover the Treaty of Waitangi as a **Westphalian model treaty**,³ extends those fundamental protections to all parties regardless of cultural heritage.
4. The petitioner's proposed amendment, makes explicit the written LAW, and the proper interpretation, of the NZ Bill of Rights 1990, with respect to the rights and freedoms in Sections 8, 9, 10, and 11, under the heading; ***Life and security of the person.***

8 Right not to be deprived of life

No one shall be deprived of life except on such grounds as are established by law and are consistent with the principles of fundamental justice.

9 Right not to be subjected to torture or cruel treatment

1 Petition of Greg Rzesniowiecki: Amend Section 5 and add a new section 5A to the NZ Bill of Rights Act 1990: https://www.parliament.nz/en/pb/petitions/document/PET_117877/petition-of-greg-rzesniowiecki-amend-section-5-and-ad

2 NZ Constitution on the Governor General's website: <https://gg.govt.nz/office-governor-general/roles-and-functions-governor-general/constitutional-role/constitution>

3 "The Westphalian Model in Defining International Law: Challenging the Myth" by Stéphane Beaulac, published in Australian Journal of Legal History, (AJLH 9), 2004: <http://classic.austlii.edu.au/au/journals/AJLH/2004/9.html>

Everyone has the right not to be subjected to torture or to cruel, degrading, or disproportionately severe treatment or punishment.

10 Right not to be subjected to medical or scientific experimentation

Every person has the right not to be subjected to medical or scientific experimentation without that person's consent.

11 Right to refuse to undergo medical treatment

Everyone has the right to refuse to undergo any medical treatment.

The New Zealand Constitution

5. The New Zealand [Constitution](#),⁴ is situated within the Treaty of Waitangi, statute law, including the NZ BORA, [common law](#),⁵ unwritten constitutional principles, the concepts of Rule of Law and Justice, balanced against the sovereignty of the NZ Parliament, and the principle of the separation of the three Crown powers centred in the Executive, Legislature and Judiciary.

6. NZ's development as a modern Westphalian nation state, and rise as a medium power, results from a historic process including; her clash of civilisations experience, and the resultant cross fertilisation of culture between the indigenous Maaori, and Pakeha colonialists, from mostly European and particularly UK heritage.

7. NZ's unwritten constitution, arose from the tradition provided by the United Kingdom (UK) in respect to her unwritten constitution, and system of executive government, which relied on common law determinations, parliament confirmed statutes, and a judiciary to interpret, and in some cases make the law (common law). The eight hundred (800) year

4 NZ Constitution on the website of the Department of Prime Minister and Cabinet: <https://dpmc.govt.nz/our-business-units/cabinet-office/supporting-work-cabinet/cabinet-manual/introduction> Note: that the cabinet manual is not a lawful document, that is it has no legal standing, but is the administration of the day's method, or guidance for transacting its business.

5 Section 5 of the Imperial Laws Application Act 1988: <https://www.legislation.govt.nz/act/public/1988/0112/latest/whole.html#DLM135088> provides; 5 *Application of common law of England After the commencement of this Act, the common law of England (including the principles and rules of equity), so far as it was part of the laws of New Zealand immediately before the commencement of this Act, shall continue to be part of the laws of New Zealand.*

old [Magna Carta](#)⁶ is a foundation stone of the English common law where, the absolute power of the sovereign is constrained by agreed written law.

8. For historical reasons the UK and its democracy had not felt the necessity to formalise, or constrain, the application of state power into a written constitution. Their system of appeals to the Courts and ultimately the Lords of the Privy Council gave the impression of a sophisticated Justice system, interpreting law found within the UK Parliament's statutes, common law, and by applying the Rule of Law. Thus the UK constitution is an unwritten common law constitution, as is the NZ legal, or lawful foundation, which arises from the UK system (notwithstanding any claims⁷ in respect to constitutional legitimacy of the present arrangements).

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- 6 "Magna Carta in a Handcart, From 1215 to 2015 and Far Beyond" Special lecture by Nigel J Jamieson on the 800th year anniversary of the Magna Carta: <https://www.studocu.com/en-nz/document/university-of-otago/introduction-to-law/nigel-j-jamieson-magna-carta-in-a-handcart-from-1215-to-2015-and-far-beyond/15915559> extracts, page. 92; *It's the task of the prophet-historian to weigh up the lost causes of history against her more promising gains. For the legal historian, **the measure applied is that of justice under the law.** For this academic balancing act, with one hand we hold firmly onto justice as our objective, while with our other hand we weigh up law as the means of achieving this objective of justice. We shall apply this measure, which is the task of what we variously call jurisprudence or the science of law, to Magna Carta. We do so because Magna Carta purports to be a legal document in its endeavour to right wrongs, and so to seek justice by correcting injustice.* And page. 93; *In celebrating Magna Carta now we do so for all time, since it's never too late to remind ourselves of Magna Carta. As the 18th century champion of freedom, Tom Paine, once wrote, **"Those who expect the blessings of freedom, must, like men, undergo the fatigues of supporting it"** And page. 94; *It took a like mind to that of Tom Paine, in this case that of the French lawyer, Charles-Louis Montesquieu, **to identify and uphold The Spirit of the Laws; without which spirit of freedom under the Charter we fall prey to despotism, instead of sustaining what we think ourselves to know for being democracy. We so often forget our need for freedom under the law as to become dispirited about democracy.*** (Petitioner's emphasis)*
- 7 Law and sovereignty exist in a context of claims and counter claims woven in history and precedent. The Petitioner's object is for the NZ Parliament to amend Section 5 BORA as provided by the petition's text. The Petitioner recognises the Authority of the House and its constituent Members to make such an Act and enforce it. The Petitioner invokes the law, truth and reason in this paper to present the justification and motive for Members to Act as petitioned.

9. NZ's Constitution as a common law [unwritten constitution](#)⁸ is unique amongst the nations of the world of people. The only other nations that have largely unwritten constitutions are Israel, and the UK (except for the period when the UK submitted to European Union (EU) control by acceding to the Maastricht Treaty 1993 which established the EU and the later Treaty of Lisbon 2007 which amended and updated the EU Constitutional arrangements until the break provided by Brexit).

10. NZ's unicameral parliament and the principle of parliamentary sovereignty provide considerable power to the House to pass any law. With great power comes great responsibility to get it correct.

11. Several enactments tie the threads of some of the written law together including; [Imperial Laws](#)⁹ Application Act 1988, which states;

*Schedule 1 Imperial enactments in force in New Zealand Constitutional enactments (1275) 3 Edw 1, c 1—(Statutes of Westminster the First): so much of that Act as is stated in the words “**The King willeth and commandeth ... that common right be done to all, as well poor as rich, without respect of persons.**”, [being the English translation of part of the authentic text of that Act as it appears in the edition called Statutes of the Realm].*

Recognition of **common rights** is provided within the written portion of the NZ Constitution.

8 Allan, James, Against Written Constitutionalism (2015). Otago Law Review, (2015) Vol. 14, No. 1, : <https://ssrn.com/abstract=2949601> Abstract; This paper limits itself to the democratic world and then argues against American-style written constitutionalism and in favour of a New Zealand-style unwritten constitutional arrangement. The author contends that the usual arguments Americans make for powerful judges exercising strong judicial review on the basis of interpreting a written constitution are not as persuasive as they are generally assume to be. Full text link: <https://deliverypdf.ssrn.com/delivery.php?ID=39302409302406909506601100609308806503508704805109306110100411106410607006800200400900700611101512111108089031112087002001016117014070089021011087110005076106084062077052121122100081004115094028117084024102088076102079109114001064005028100031009103&EXT=pdf&INDEX=TRUE> Allan's observations on page 195 (pg 5 pdf.) are noteworthy for the irony when considered against the present COVID-19 phenomena: Are there nevertheless limits on power in New Zealand? Of course there are. Can those limits largely or overwhelmingly be traced back to one over-arching document, as in Canada, Australia and the United States? No. Limits on power here in New Zealand flow from a bunch of statutes, all of which can be altered in the normal way by Parliament, even the statutory bill of rights. They flow from conventions, and more here perhaps than elsewhere. They flow from elections and the democratic process. We can debate the limits flowing from the Treaty of Waitangi. What an unwritten constitution gives you is an incredibly democratic set-up. Each generation is left to vote for Members of Parliament (“MPs”) who, through Parliament, can do what they think is best. There are no constitutionalised legal limits on the power of that Parliament. That is the main thing to remember about an unwritten constitution.

9 Imperial Laws Application Act 1988: <https://www.legislation.govt.nz/act/public/1988/0112/latest/whole.html#DLM135074> which includes; Schedule 1 Imperial enactments in force in New Zealand

12. Further to paragraph 11, NZ's Constitution included the following enactments from the UK common law constitution; [Magna Carta 1297](#),¹⁰ [Bill of Rights 1688](#),¹¹ and the [Act of Settlement 1700](#).¹²

13. Key to the historic and lawful foundation of the nation of New Zealand is [Te Tiriti](#)¹³ o Waitangi, The Treaty of Waitangi, signed 6 February 1840, and the precursor [He Whakaputanga](#)¹⁴ o te Rangatiratanga o Nu Tirenī – the Declaration of Independence of the United Tribes of New Zealand, declared 28 October 1835. He Whakaputanga was how rangatira (Māori leaders) declared to the world, back in 1835 that, **New Zealand is an independent Māori nation.**

14. He Whakaputanga and Te Tiriti might be regarded as New Zealand's earliest constitutional elements, notwithstanding; earlier treaties, Maori tikanga, common law and natural law, written or known elsewhere.

15. Additionally, New Zealand's law and constitutional foundations are expanded with the body of [international law](#),¹⁵ covenants, protocols and treaties agreed, ratified and legislatively enabled as circumstance, and or necessity demands.

16. International law¹⁶ prioritises the [Charter](#)¹⁷ of the United Nations, Universal Declaration of Human Rights, the treaties to accede to the development of the World Health Organisation, World Trade Organisation. Further covenants providing for civil and political rights, indigenous rights, the right not to be tortured, the rights of women, children, and

10 "Magna Carta 1297":

<https://www.legislation.govt.nz/act/imperial/1297/0029/latest/whole.html#DLM10929>

11 "Bill of Rights 1688": <https://www.legislation.govt.nz/act/imperial/1688/0002/latest/DLM10993.html>

12 "Act of Settlement 1700": <https://www.legislation.govt.nz/act/imperial/1700/0002/latest/DLM11131.html>

13 Te Tiriti o Waitangi, The Treaty of Waitangi signed 6 February 1840:

<https://nzhistory.govt.nz/politics/treaty/read-the-treaty/english-text> Note: following the Waitangi Tribunal consideration of the matter, and their October 2014 decision and recommendation (He Whakaputanga me te Tiriti: The Declaration and the Treaty is the Tribunal's report on stage 1 of the Wai 1040 Te Paparahi o te Raki inquiry), it is clear that the te reo Māori version has standing in international law. Māori did not cede sovereignty to the UK Crown; "He Whakaputanga me te Tiriti / The Declaration and the Treaty Report Summary" published December 2014:

https://forms.justice.govt.nz/search/WT/reports/reportSummary.html?reportId=wt_DOC_85648980

14 He Whakaputanga o te Rangatiratanga o Nu Tirenī – the Declaration of Independence of the United Tribes of New Zealand declared 28 October 1835: <https://natlib.govt.nz/he-tohu/about/he-whakaputanga>

15 New Zealand Law Commission, "International Law and the Law of New Zealand": <http://www.nzlii.org/nz/other/nzlc/report/R34/R34-Part.html>

16 International law is not international common law with its precepts, i.e. **do no harm**, although international laws and common law rights and freedoms intersect in the law systems of the world. We can find precedent for human rights in both jurisdictions and there's the innate right to freedom that arises in being.

17 Charter of the UN see Preamble and articles 1.3, 55, (similar text) and 103; Article 1 The Purposes of the United Nations are: 1.3. To achieve international co-operation in solving international problems of an economic, social, cultural, or humanitarian character, and in promoting and encouraging respect for human rights and for fundamental freedoms for all without distinction as to race, sex, language, or religion. Article 103 In the event of a conflict between the obligations of the Members of the United Nations under the present Charter and their obligations under any other international agreement, their obligations under the present Charter shall prevail: <https://www.un.org/en/about-us/un-charter/full-text>

minorities, and the various Vienna conventions on the conduct of war, including the ban on [biological](#)¹⁸ warfare (there are many).

17. The Petitioner¹⁹ asserts that; **providing each actor act ethically to play their part in government in pursuit of the common and public good, as established in common sense and Law, the amendment I propose would be superfluous, as the response to the COVID-19 pandemic, would be guided by critical thinking, balancing the needs of all who comprise the New Zealand nation-state, in accordance with Rule Of LAW.**

18. Nevertheless, it is necessary that I present my case, and that YOU take the time to apprehend my intent and reasons. Firstly we must ask, "What does it mean to Bind the Crown?" and "What does it mean to **Affirm** a Law or Right?"

Legislation Act 2019 provides in Section [22](#)²⁰;

22 Legislation not binding on the Crown

(1) No Act or part of an Act binds the Crown unless the Act (or other legislation) expressly provides that the Crown is bound by the Act or part.

Blacks Law dictionary definitions of [Bind](#),²¹ and [Bound](#),²² explicitly indicate a voluntary agreement or contract among equal parties. Thus the Crown binds itself to the Act.

Whereas in **NZ BORA** Section [2](#)²³;

2 Rights affirmed

The rights and freedoms contained in this Bill of Rights are affirmed.

18 UN Convention against biological weapons (BWC): <https://www.un.org/disarmament/biological-weapons/> whose object is; *States Parties to the Biological Weapons Convention undertook "never in any circumstances to develop, produce, stockpile or otherwise acquire or retain: microbial or other biological agents, or toxins whatever their origin or method of production, of types and in quantities that have no justification for prophylactic, protective or other peaceful purposes; weapons, equipment or means of delivery designed to use such agents or toxins for hostile purposes or in armed conflict."* Despite its high level nature the BWC is largely recommendatory only and effectively unenforceable as is evident from observing the proliferation of bioweapons programs by many nation states.

19 The Petitioner asserts he is informed and reasonable in his opinions in light of the evidence and testimony herein and elsewhere in relation to matters in the democracy.

20 Legislation Act 2019 provides in Section 22 Legislation not binding on the Crown:

<https://www.legislation.govt.nz/act/public/2019/0058/latest/whole.html#DLM7298269>

21 Blacks Law dictionary definitions of Bind explicitly indicates a voluntary agreement or contract, Bind:

<https://thelawdictionary.org/legally-binding/>

22 Bound explicitly indicates a voluntary agreement or contract: <https://thelawdictionary.org/bound/>

23 NZ BORA Section 2 Rights affirmed:

<https://www.legislation.govt.nz/act/public/1990/0109/latest/DLM224798.html>

And where [Affirm](#)²⁴ means;

To ratify, make firm, confirm, establish, reassert. To ratify or confirm a former law or judgement. Cowell.²⁵ In the practice of appellate courts, to affirm a judgement, decree, or order, is to declare that it is valid and right, and must stand as rendered below; to ratify and reassert it; to I concur in its correctness and confirm its efficacy. In pleading. To allege or aver a matter of fact; to state it affirmatively; the opposite of deny or traverse. . In practice. To make an affirmation; to make a solemn and formal declaration or assertion that an affidavit is true, that the witness will tell the truth, etc.. this being substituted for an oath in certain cases. Also, to give testimony on affirmation. In the law of contracts. A party is said to affirm a contract the same being voidable at his election, when he ratifies and accepts it, waives his right to annul it, and proceeds under it as if it had been valid originally.

Affirmation indicates agreement with a preceding principle or law

19. The Crown, binds itself to a "new agreement or contract", where the Act states: "This Act binds the Crown".

20. Where the Crown **affirms** a matter, it is agreeing to be bound to a prior authority; in the case of BORA, to pre-existing or foundational rights in common law, international law - including the International Covenant on Civil and Political Rights, and otherwise rendered, in recognition of, the foundational nature of human rights inherent in one being born, and the commensurate obligations, and/or duties being human entails.

Oaths and Declarations by those holding public office

21. NZ Parliamentarians are [sworn](#)²⁶ into office, in accordance with section 17 of the Oaths and Declarations Act 1957, as required in [section 11](#)²⁷ of The Constitution Act 1986.

17 Oath of allegiance

24 Affirm means: <https://thelawdictionary.org/affirm/> Also the NZ Ministry of Justice glossary webpage: <https://www.justice.govt.nz/about/glossary/> defines; **Affirmation**, A declaration that a person asserts to be true and correct (but without any reference to God). An affirmation has the same legal effect as an oath.

25 "Cowell", maybe a reference to John Cowell, UK Jurist, (1554 – 11 October 1611).

26 Oath of Allegiance section 17 of the Oaths and Declarations Act 1957
<https://www.legislation.govt.nz/act/public/1957/0088/latest/whole.html#DLM316131>

27 The Constitution Act 1986, Section 11 Oath of allegiance to be taken by members of Parliament:
<https://www.legislation.govt.nz/act/public/1986/0114/latest/DLM94233.html>

The oath in this Act referred to as the oath of allegiance shall be in the form following, that is to say:

I, [specify], swear that I will be faithful and bear true allegiance to Her [or His] Majesty [specify the name of the reigning Sovereign, as thus: Queen Elizabeth the Second], Her [or His] heirs and successors, according to law. So help me God.

Additionally members of the NZ Executive Council (the Ministers of the Crown) are required to swear an oath as set out in section 19 of the Oaths and Declarations Act 1957;

19 Executive Councillor's oath

(1) The oath in this Act referred to as the Executive Councillor's oath shall be in the form following, that is to say:

I, [specify], being chosen and admitted of the Executive Council of New Zealand, swear that I will to the best of my judgment, at all times when thereto required, freely give my counsel and advice to the Governor-General for the time being, for the good management of the affairs of New Zealand. That I will not directly nor indirectly reveal such matters as shall be debated in Council and committed to my secrecy, but that I will in all things be a true and faithful Councillor. So help me God.

Members of the NZ Judiciary are required to swear an oath to assume office as set out in section 18 of the Oath and Declarations Act 1957;

18 Judicial oath

The oath in this Act referred to as the judicial oath shall be in the form following, that is to say:

I, [specify], swear that I will well and truly serve Her [or His] Majesty [specify as above], Her [or His] heirs and successors, according to law, in the office of [specify]; and I will do right to all manner of people after the laws and usages of New Zealand, without fear or favour, affection or ill will. So help me God.²⁸

22. Where the NZ Parliamentary Representatives, Judiciary, members of the NZ Executive Council, and more servants of the public, make oaths of allegiance to the [Monarch](#)²⁹ - Her Majesty The Queen In Right Of New Zealand, they do so to her Office,

²⁸ And so God help the Justices, and whilst on the matter, the Parliamentarians ought look at the Judicial Oath content; *I will well and truly serve.. according to law.. I will do right to all manner of people after the laws and usages of New Zealand, without fear or favour, affection or ill will. So help me God.*

²⁹ The monarchy of New Zealand is the constitutional system of government in which a hereditary monarch is the sovereign and head of state of New Zealand, from Wikipedia:

which is bound by her Oath upon [Coronation](#)³⁰. The Coronation of Her Majesty Queen Elizabeth II occurred in the Abbey Church of St. Peter, Westminster, on Tuesday, the second day of June, 1953. The form of the [Monarch's Oath](#)³¹ has a long history to 973AD for the Oath upon Coronation of the Anglo-Saxon, King Edgar.

The Oath of Office made by Elizabeth II in 1953 upon Coronation and the first sitting of parliament following her Crowning as Monarch included a specific commitment to govern the peoples of the Commonwealth in the following [terms](#)³²;

IV. The Oath

The Queen having returned to her Chair (her Majesty having already on Tuesday, the fourth day of November, 1952, in the presence of the two Houses of Parliament, made and signed the Declaration prescribed by Act of Parliament), the Archbishop standing before her shall administer the Coronation Oath, first asking the Queen,

Madam, is your Majesty willing to take the Oath?

And the Queen answering,

I am willing,

The Archbishop shall minister these questions; and the Queen, having a book in her hands, shall answer each question severally as follows:

Archbishop: Will you solemnly promise and swear to govern the Peoples of the United Kingdom of Great Britain and Northern Ireland, Canada, Australia, New Zealand, the Union of South Africa, Pakistan and Ceylon, and of your Possessions and other Territories to any of them belonging or pertaining, according to their respective laws and customs?

Queen: I solemnly promise so to do.

https://en.wikipedia.org/wiki/Monarchy_of_New_Zealand

30 This Note offers a summary of coronation procedures and sets out the statutory requirements for the Coronation Oath: <https://researchbriefings.files.parliament.uk/documents/SN00435/SN00435.pdf>

31 The general framework of the coronation service is based on the sections contained in the Second Recension used in 973 for King Edgar. Although the service has undergone two major revisions, a translation and has been modified for each coronation for the following thousand years, the sequence of taking an oath, anointing, investing of regalia, crowning and enthronement found in the Anglo-Saxon text have remained constant. The coronation ceremonies takes place within the framework of Holy Communion: https://en.wikipedia.org/wiki/Coronation_of_the_British_monarch#Service

32 Oath of Office made by Elizabeth II in 1953 upon Coronation and the first sitting of parliament following her Crowning as Monarch included a specific commitment to govern the peoples of the Commonwealth according to their respective laws and customs: <http://www.oremus.org/liturgy/coronation/cor1953b.html>

Archbishop: Will you to your power cause Law and Justice, in Mercy, to be executed in all your judgements?

Queen: I will.

Archbishop: Will you to the utmost of your power maintain the Laws of God and the true profession of the Gospel?

Will you to the utmost of your power maintain in the United Kingdom the Protestant Reformed Religion established by law? Will you maintain and preserve inviolably the settlement of the Church of England, and the doctrine, worship, discipline, and government thereof, as by law established in England?

And will you preserve unto the Bishops and Clergy of England, and to the Churches there committed to their charge, all such rights and privileges, as by law do or shall appertain to them or any of them?

Queen: All this I promise to do.

Then the Queen arising out of her Chair, supported as before, the Sword of State being carried before her, shall go to the Altar, and make her solemn Oath in the sight of

[The Bible to be brought.]

all the people to observe the premisses: laying her right hand upon the Holy Gospel in the great Bible (which was before carried in the procession and is now brought from the altar by the Archbishop, and tendered to her as she kneels upon the steps), and saying these words:

The things which I have here before promised, I will perform, and keep. So help me God.

[And a Silver Standish.]

Then the Queen shall kiss the Book and sign the Oath.

The Queen having thus taken her Oath, shall return again to her Chair, and the Bible shall be delivered to the Dean of Westminster.

Of primary importance is the FACT that Her Majesty Queen Elizabeth II, has bound Herself to uphold **Law** and **Justice**, as central principles in Her Role as Head of State of the British Crown, and present incumbent as the Queen of New Zealand. **Those who swear allegiance to the Queen, do so to Law and Justice also.**

Rule of law

23. Rule of law is foundational to each of the Superior Courts Act of 2016, see [Sec 3\(2\)](#)³³; the Lawyers and Conveyancers Act 2006, see [Sec 4\(a\)](#)³⁴; and the Policing Act 2008, see [Sec 8\(a\)](#)³⁵.

24. There is much discussion as to what the principle “rule of law” means and requires of those charged with its maintenance and administration. Various prominent lawyers and judges have commented on rule of law, and the nature of national constitutions:

Rule of Law by Dicey

*Dicey*³⁶ regarded rule of law as the bedrock of the British Legal System: ‘this doctrine is accepted in the constitutions of U.S.A. and India.

*Dicey’s Rule of Law*³⁷: according to Prof. Dicey, rules of law contains three principles or it has three meanings as stated below:

1. *Supremacy of Law* : The First meaning of the Rule of Law is that ‘no man is punishable or can lawfully be made to suffer in body or goods except for a distinct breach of law established in the ordinary legal manner before the ordinary courts of the land

2. *Equality before Law* : the Second meaning of the Rule of Law is no man is above law

3. *Predominance of Legal Spirit or the Third meaning of the Rule of Law* is the general principles of the constitution are the result of juridical decisions determining file rights of private persons in particular cases brought before the Court.

And;

33 Rule of law clause Superior Courts Act of 2016, see Sec 3(2):

<https://legislation.govt.nz/act/public/2016/0048/latest/whole.html#DLM5759269>

34 Rule of law clause Lawyers and Conveyancers Act 2006, see Sec 4(a):

<https://legislation.govt.nz/act/public/2006/0001/latest/whole.html#DLM364946>

35 Rule of law clause Policing Act 2008, see Sec 8(a):

<https://www.legislation.govt.nz/act/public/2008/0072/latest/whole.html#DLM1102186>

36 Albert Venn Dicey KC FBA (1835–1922), usually cited as A. V. Dicey, was a British Whig jurist and constitutional theorist: https://en.wikipedia.org/wiki/A._V._Dicey

37 Dicey regarded rule of law as the bedrock of the British Legal System:

http://lc2.du.ac.in/DATA/Presentation%20on%20Rule%20of%20Law_Chintu%20Jain.pdf

The Rule of Law, in its most basic form, is the principle that no one is above the law. The rule follows logically from the idea that truth, and therefore law, is based upon fundamental principles which can be discovered, but which cannot be created through an act of will.

25. Lawyer and now High Court Justice, **Matthew Palmer**, offers his definition or sense of rule of law, in his 2013 address; "Assessing the [Strength](#)³⁸ of the Rule of Law in New Zealand" Paper to New Zealand Centre for Public Law Conference "Unearthing New Zealand's Constitutional Traditions" Wellington, 30 August 2013;

I offer my own conception of the rule of law for the purpose of attempting to hone in on its conceptual essence. I want to discern the core elements of the doctrine that are common to most others' accounts and that can be simply and coherently stated so that the rule of law can relatively easily grasped and applied.

As I noted in a 2007 article, and a 2008 book, my definition centres on certainty and the freedom from arbitrariness in the law. It involves taking seriously the words of the phrase "the rule of law". The phrase itself suggests there is some distinctly separate or objective meaning to law that is independent of human agency. It is law itself, in its independent meaning, that rules and that should rule. I suggest:

The rule of law requires that the meaning of law is:

- *Independent from those who make the law.*
- *Independent from those who apply the law.*
- *Independent from those to whom it is applied.*
- *Independent from the time at which it is applied.*

This formulation emphasises that the rule of law is an ideal. All law is, of course, a human construct – formulated by humans, applied by humans, to humans. We must all accept by now that giving meaning to words is inherently an interpretative exercise by an interpretive community composed of human actors. In this I follow and acknowledge Stanley Fish's work in particular:

there is no such thing as literal meaning, if by literal meaning one means a meaning that is perspicuous no matter what the context and no matter what

³⁸ "Assessing the Strength of the Rule of Law in New Zealand" Dr Matthew S R Palmer, Barrister, Thorndon Chambers - Paper presented to the New Zealand Centre for Public Law Conference on "Unearthing New Zealand's Constitutional Traditions" Wellington, 30 August 2013:
https://works.bepress.com/matthew_palmer/38/

is in the speaker's or hearer's mind, a meaning that because it is prior to interpretation can serve as a constraint on interpretation

The ideal that the rule of law strives for is to remove, as far as practical, the influence of the particular human actors... (Petitioner's emphasis)

Unwritten Constitutional Principles

26. Canadian Jurist Rt Hon [Beverley McLachlin](#)³⁹ delivered the annual [Lord Cooke of Thorndon Lecture](#)⁴⁰ at the Victoria University of Wellington Law School, 1 December 2005: ***Unwritten Constitutional Principles: What is going on?*** and makes the following observations pertinent to our matter:

Having examined whether unwritten constitutional principles violate the idea that laws should be written, and having identified three sources from which these principles can be ascertained, I turn now to the final problem: the problem of judicial legitimacy.

*Here we face another apparent contradiction. On the one hand, the legitimacy of the judiciary depends on the justification of its decisions by reference to a society's fundamental constitutional values. This is what we mean when we say the task of judges is to do justice. **Judges who enforce unjust laws – laws that run counter to fundamental assumptions about the just society – lose their legitimacy. When judges allow themselves to be coopted by evil regimes, they are no longer fit to be judges. This is the lesson of the Nuremberg Trials. It is also a lesson, however, that should embolden judges when faced with seemingly more mundane manifestations of injustice.*** (Petitioner's emphasis on this key point)

And..

The question of judicial legitimacy returns us to the conundrum I alluded to at the outset. To be legitimate, judges must conform to fundamental moral norms of a constitutional nature. But when they do, they risk going beyond what would appear to be their judicial functions. How is the conundrum to be resolved? The answer, I would suggest, is that the conundrum is a false one; that judges must be able to do justice and at the same time stay within the proper confines of their role.

³⁹ Canadian Jurist Rt Hon Beverley McLachlin, Wikipedia: https://en.wikipedia.org/wiki/Beverley_McLachlin

⁴⁰ "Unwritten Constitutional Principles: What is going on?" by Beverley McLachlin, annual Lord Cooke of Thorndon Lecture, Victoria University of Wellington Law School, 1 December 2005: <https://www.scc-csc.ca/judges-juges/spe-dis/bm-2005-12-01-eng.aspx>

The role of judges in a democracy is to interpret and apply the law. The law involves rules of different orders. The highest is the order of fundamental constitutional principles. These are the rules that guide all other lawmaking and the exercise of executive power by the state. More and more in our democratic states, we try to set these out in writing. But when we do not, or when, as is inevitable, the written text is unclear or incomplete, recourse must be had to unwritten sources.

The task of the judge, confronted with conflict between a constitutional principle of the highest order on the one hand, and an ordinary law or executive act on the other, is to interpret and apply the law as a whole – including relevant unwritten constitutional principles.

This presupposes that the constitutional principle is established having regard to the three sources just discussed – usage and custom; values affirmed by relevant textual constitutional sources; and principles of international law endorsed by the nation. Determining whether these sources disclose such principles is quintessential judicial work. It must be done with care and objectivity. It is not making the law, but interpreting, reconciling and applying the law, thus fulfilling the judge's role as guarantor of the constitution.

How does the judge discharge this duty? First, it seems to me, the judge must seek to interpret a suspect law in a way that reconciles it with the constitutional norm, written or unwritten.

*Usually, this will resolve the problem. **But in rare cases, it may not. If an ordinary law is clearly in conflict with a fundamental constitutional norm, the judge may have no option but to refuse to apply it.*** (Petitioner's emphasis)

The Law of the Covid Pandemic

27. The Petitioner notes that in the case of **Andrew Borrowdale vs the Director General of Health** CA520/2020 [2021] NZCA 520 Court of Appeal [hearing](#)⁴¹ before Justices French, Cooper and Collins, which dismissed Andrew Borrowdale's appeal, their decision made a clear observation that certain rights may not be derogated.

At paragraphs [109] and [110] on pages 30/31 of the decision they make the following observations in respect to the **International Covenant on Civil and**

⁴¹ <https://www.courtsofnz.govt.nz/assets/cases/2021/2021-NZCA-520.pdf>

Political Rights ([ICCPR](#)⁴²) and in respect to section 8 NZ BORA; *right not to be deprived of life*.

[109] Certain rights may not be derogated. The rights in the ICCPR that are treated as being sacrosanct include the rights to life, religion, and freedom from torture and slavery. On the other hand, the rights to freedom of movement, assembly and association in arts 12, 21 and 22 of the ICCPR may be derogated.

[110] For completeness, we record the rights contained in the NZBORA include the right in s 8 not to be deprived of life. No counsel suggested the NZBORA right not to be deprived of life was engaged in this case. The position taken by counsel accurately reflects the narrow meaning that has been given to s 8 of the NZBORA.

The Honourable Justices assist in making the case that it is unlawful to derogate from specific articles of the ICCPR and NZ BORA.

28. Notwithstanding the point made in their NZCA 520 Court of Appeal hearing paragraphs [109-110], the most efficacious way to eliminate the intent and spirit of any law, is to narrow its meaning and application, and weaken its enforcement - by denying or delaying prosecution. Invariably Authority acts and establishes, its unlawful beachhead which the people must resist and counter in the Courts of the Authority, where they desire a rule of law abiding nation state and governance system.

29. For the record the Petitioner observes, that in the case of COVID-19, articles 12, 21, and 22 of the ICCPR (freedom of movement, assembly, and association) have been derogated without justification or proportionality with respect to the application of rule of law. Freedom of movement, assembly, and association are fundamental civil and human rights (in international law). These freedoms are essential to a democracy and may only be derogated in the most extreme cases of a clear and present danger, i.e., during a war, when foreign forces are invading, or some nefarious force release the deadly disease smallpox from their laboratory (or other deadly pathogen or toxic agent).

30. In other words, this is an example of **illegitimate back sliding** for an illness whose average mortality is no worse than common influenza albeit with a well established age dependent selectivity and an affinity for specific [endotype](#)⁴³ outcomes for patients, and to which most healthy people's natural immune response is sufficient to clear the disease.

42 International Covenant on Civil and Political Rights (ICCPR):
<https://www.ohchr.org/EN/ProfessionalInterest/Pages/CCPR.aspx>

43 Identification of Endotypes of Hospitalized COVID-19 Patients:
<https://pubmed.ncbi.nlm.nih.gov/34859018/> outcome - "High comorbidities did not associate with poor outcome endotypes. Further work is needed."

31. The Petitioner notes that [section 92F](#)⁴⁴ of the Public Health Act 1956 has application in this matter, specifically COVID-19's low level of infectivity, morbidity and mortality;

92F Principle of proportionality

Measures applied to an individual under this Part must—

(a) be proportionate to the public health risk sought to be prevented, minimised, or managed; and

(b) not be made or taken in an arbitrary manner.

NZ derogation from the Bill of Rights

32. New Zealand's Bill of Rights has its [inception](#)⁴⁵ in the ***International Covenant on Civil and Political Rights*** ([ICCPR](#)⁴⁶) and is the NZ Parliament and Government's effort, toward implementing its ratification of that treaty obligation.

33. The ICCPR treaty guides the proper interpretation of the LAW in respect to any derogation from the NZ Bill of Rights 1990.

33. Following is a statement from the Human Rights Committee dated 24 April 2020 (UN Human Rights Committee was established under the ICCPR) - [Statement](#)⁴⁷ on derogations from the Covenant in connection with the COVID-19 pandemic, [CCPR/C/128/2](#) (24 April 2020). Extract:

The Human Rights Committee's stated guidance to States parties on the requirements and conditions laid down in article 4 of the Covenant concerning derogations from the Covenant, in particular clause 2 (d) on page two;

States parties may not resort to emergency powers or implement derogating measures in a manner that is discriminatory, or that violates other obligations that they have undertaken under international law, including under other international human rights treaties from which no derogation is allowed. Nor can States parties deviate from the non-

44 Section 92F of the Public Health Act 1956:

<https://www.legislation.govt.nz/act/public/1956/0065/latest/whole.html#DLM307426>

45 A Bill of Rights for New Zealand – A White Paper by Sir Geoffrey Palmer tabled in the NZ Parliament 1985: <https://www.ojp.gov/pdffiles1/Digitization/108981NCJRS.pdf>

46 NZ Bill of Rights is the NZ Parliament and Government's effort at implementing its ratification of the ICCPR: https://en.wikipedia.org/wiki/International_Covenant_on_Civil_and_Political_Rights

47 UN Human Rights Committee statement on derogations from the ICCPR in connection with the COVID-19 pandemic, [CCPR/C/128/2](#) (24 April 2020): <https://www.ohchr.org/Documents/HRBodies/CCPR/COVIDstatementEN.pdf>

derogable provisions of the Covenant – article 6 (right to life), article 7 (prohibition of torture or cruel, inhuman or degrading treatment or punishment, or of medical or scientific experimentation without consent), article 8, paragraphs 1 and 2 (prohibition of slavery, the slave trade and servitude), article 11 (prohibition of imprisonment because of inability to fulfil a contractual obligation), article 15 (principle of legality in the field of criminal law), article 16 (recognition of everyone as a person before the law) and article 18 (freedom of thought, conscience and religion) – or from other rights that are essential for upholding the nonderogable rights found in the aforementioned provisions and for ensuring respect for the rule of law and the principle of legality even in times of public emergency, including the right of access to court, due process guarantees and the right of victims to obtain an effective remedy;

International Covenant on Civil and Political Rights:

34. NZ's has conditionally [accepted](#)⁴⁸ the ICCPR. In doing so, **NZ has ratified Article 4 and 7 of the ICCPR:**

Article 4

1 . In time of public emergency which threatens the life of the nation and the existence of which is officially proclaimed, the States Parties to the present Covenant may take measures derogating from their obligations under the present Covenant to the extent strictly required by the exigencies of the situation, provided that such measures are not inconsistent with their other obligations under international law and do not involve discrimination solely on the ground of race, colour, sex, language, religion or social origin.

2. No derogation from articles 6, 7, 8 (paragraphs 1 and 2), 11, 15, 16 and 18 may be made under this provision.

3. Any State Party to the present Covenant availing itself of the right of derogation shall immediately inform the other States Parties to the present Covenant, through the intermediary of the Secretary-General of the United Nations, of the provisions from which it has derogated and of the reasons by

⁴⁸ NZ's conditional acceptance of the ICCPR: <https://www.justice.govt.nz/justice-sector-policy/constitutional-issues-and-human-rights/human-rights/international-human-rights/international-covenant-on-civil-and-political-rights/>

which it was actuated. A further communication shall be made, through the same intermediary, on the date on which it terminates such derogation.

Article 7

No one shall be subjected to torture or to cruel, inhuman or degrading treatment or punishment. In particular, no one shall be subjected without his free consent to medical or scientific experimentation.

35. The [Siracusa](#)⁴⁹ Principles on the Limitation and Derogation Provisions in the International Covenant on Civil and Political Rights make clear the non-derogation of certain articles even in times of public emergency. The test of proportionality is set at a high level.

36. The **COVID-19 Public Health Response**⁵⁰ **Act 2020** (ascent 13 May 2020) is the foundation for most of the legislative acts of the NZ Parliament following the repeal of the earlier Declarations of Emergency to invoke specific powers many thought were [excessive](#)⁵¹ at the time. The legislation was passed 63 votes to 57 with the National and ACT parties voting against the Bill at the Third Reading.

37. The Regulatory Impact Statement for the Bill included advice from the Ministry of Justice in respect to derogations from the BORA as provided in Sec 7; "[Consistency](#)⁵² with the New Zealand Bill of Rights Act 1990: COVID-19 Public Health Response Bill" published 11 May 2020. The report acknowledges derogation from Section 11 BORA "right to refuse to undergo medical treatment" as follows;

Section 11 - Right to refuse to undergo medical treatment

27. Section 11 of the Bill of Rights Act affirms that everyone has the right to refuse to undergo medical treatment. The right to refuse to undergo medical treatment protects the concept of personal autonomy and bodily integrity, specifically the idea that individuals have the right to determine for themselves what they do or do not do to their own body, free from restraint or coercion.

49 Siracusa Principles on the Limitation and Derogation Provisions in the International Covenant on Civil and Political Rights by the American Association for the International Commission of Jurists, April 1985: <https://www.icj.org/wp-content/uploads/1984/07/Siracusa-principles-ICCPR-legal-submission-1985-eng.pdf>

50 COVID-19 Public Health Response Act 2020 (ascent 13 May 2020) on NZ Government legislation website: <https://legislation.govt.nz/act/public/2020/0012/latest/whole.html#LMS344134>

51 Many thought the COVID-19 Public Health Response Act was excessive when it was enacted May 2020. It passed 63 votes to 57. National and ACT parties voting against the Bill at the Third Reading: https://web.archive.org/web/20200513223302/https://www.nzherald.co.nz/nz/news/article.cfm?c_id=1&objectid=12331547

52 Regulatory Impact Statement included advice from the Ministry of Justice; "Consistency with the New Zealand Bill of Rights Act 1990: COVID-19 Public Health Response Bill" published 11 May 2020: <https://www.justice.govt.nz/assets/Documents/Publications/COVID-19-Public-Health-Response-Bill.pdf>

28. *Clause 10(a)(viii) of the Bill allows for orders to be made requiring people to report for medical examination or testing in any specified way or in any specified circumstances.*

29. *The right to refuse medical treatment is engaged where a medical service is provided to an individual in the context of a therapeutic relationship. We consider that the right to refuse medical treatment is engaged by certain forms of medical examination, and particularly, a test for COVID-19. A COVID-19 test requires the collection of a bodily sample from an individual for the purpose of diagnosis and assessment. It can include the use of a moderately invasive procedure – a nasopharyngeal swab to collect nasal secretions from the back of the nose and throat.*

30. *Clause 10(a)(vii) prima facie limits the right to refuse to undergo medical treatment.*

Where a provision proposes a limit on a right or freedom, it may nevertheless be consistent with the Bills of Rights Act if the limit is reasonable and justifiable in terms of s 5 of that Act.

31. *The s 5 inquiry may be approached as follows:*

a. does the provision serve an objective sufficiently important to justify some limitation of the right or freedom?

b. if so, then:

i. is the limit rationally connected with the objective?

ii. does the limit impair the right or freedom no more than is reasonably necessary for sufficient achievement of the objective?

iii. is the limit in due proportion to the importance of the objective?

32. *The purpose of cl 10(a)(viii) is to ensure that appropriate public health control measures can be applied in respect of people who may have COVID-19, and also that public health authorities can collect information about potentially unknown vectors of transmission in the community. The collection of this information is clearly necessary and rationally connected to the wider objective of protecting against future outbreaks of COVID-19. Public health concerns, particularly as it relates to infectious diseases, have explicitly been held to be a sufficiently important objective to justify a limit on the right to refuse medical treatment.*

33. *With regard to the proportionality of the limit on the right, we note that an outbreak of COVID-19 would have extreme consequences for public health and wellbeing. While the Bill empowers orders to be issued in respect of medical examination and testing, it does not require a person to undertake any particular ongoing form of treatment. In this way, the Bill continues to preserve the scope of personal autonomy and bodily integrity as far as is possible while maintaining public health.*

34. *For these reasons, we consider that this limitation on s 11 of the Bill of Rights Act is justifiable. We note that the taking of a bodily sample for assessment would also amount to a search or seizure of the person. However, for the same reasons that justify the limitation that the proposed provisions place on s 11 of the Bill of Rights Act, we consider that the requirement to provide a bodily sample would be reasonable in terms of s 21 of that Act*

38. Note the Ministry of Justice author states in his paragraph 33; *“While the Bill empowers orders to be issued in respect of medical examination and testing, it **does not require a person to undertake any particular ongoing form of treatment**. In this way, the **Bill continues to preserve the scope of personal autonomy and bodily integrity** as far as is possible while maintaining public health.”*

39. The lawyer(s) in the Justice Ministry in May 2020 acknowledge the difference between a diagnostic test (noting that expert scientists in the field find the PCR test to be an inappropriate tool for diagnosis of ill health see paragraph 85), and a medical procedure (any vaccine or other medication or procedure), with temporal consequences as requiring a higher test for proportionality, in assessing whether the COVID-19 Public Health Response Act, is justified in limiting rights in BORA. Note the Act in sections 9 and 10 offer that the Minister (s9); or the Director General of Health (s10); *must be satisfied that the order does not limit or is a justified limit on the rights and freedoms in the New Zealand Bill of Rights Act 1990.*

40. The right of refusal to be subjected to medical testing and examination, even in the case of an authentic pandemic or more localized epidemic emergency, could be counterbalanced by the clinically diagnosed symptomatic individual's promise, to isolate him/herself (in their home) for a number of days (as long as infectivity is likely). Such an approach is a reasonable and medically recognized alternative – isolate the ill whilst enabling the healthy to carry on with their lives - in comparison to the current arbitrary directives and guidelines. This would satisfy the “proportionality” requirement of the law, as well as individual rights over one's physical body - preserving personal autonomy, bodily integrity, and maintaining societal wellbeing.

41. The same author within the Ministry of Justice, provided the “[Consistency](#)⁵³ with the New Zealand Bill of Rights Act 1990: COVID-19 ([Vaccinations](#)) Legislation Bill” report, for the COVID-19 (Vaccinations) Legislation Bill⁵⁴ and found no breach of Section 11 of BORA with mandated injections, despite explicit proclamations which suggest the contrary from the earlier phase of the pandemic (11 May 2020), set out in paragraphs 38 and 39 above.

42. Between the period of these two statements of consistency with BORA, the Prime Minister The Hon Jacinda Ardern and more of her ministers stated that any; “COVID-19 vaccinations would not be forced”.

Extract from linked Newshub [article](#)⁵⁵ 22 September 2020;

Conspiracy theorists have claimed a COVID-19 vaccine, when available, will be “forced” on everyone - including Kiwis.

The Government has rubbished those claims, made most notably by Jami-Lee Ross and Billy Te Kahika's Advance NZ.

On Tuesday Prime Minister Jacinda Ardern went a step further, saying not only will there be no forced vaccinations, but those who choose to opt-out won't face any penalties at all.

“No, and we haven't for any vaccination in New Zealand applied penalties in that way,” Ardern told The AM Show, after being asked if there might be tax penalties or other sanctions for refusing a COVID-19 vaccine.

“But I would say for anyone who doesn't take up an effective and tested and safe vaccine when it's available, that will come at a risk to them.”

43. Was the New Zealand PM The Right Hon Jacinda Ardern misrepresenting the NZ Government's intent 22 September 2020 when she uttered the words “**no forced vaccinations?**” Alternatively had COVID-19 pandemic circumstance dramatically changed, to enable the Prime Minister and the NZ Government, to back-track on their previous public pronouncement and PM Ardern's personal commitment that “COVID-19 Vaccination would be voluntary?”

53 Ministry of Justice “Consistency with the New Zealand Bill of Rights Act 1990: COVID-19 (Vaccinations) Legislation Bill” published 23 November 2021:

<https://www.justice.govt.nz/assets/Documents/Publications/20211123-NZ-BORA-Advice-COVID-19-Vaccinations-Legislation-Bill.pdf>

54 COVID-19 (Vaccinations)1 Legislation Bill:

<https://www.legislation.govt.nz/bill/government/2021/0101/latest/whole.htm#whole>

55 Prime Minister The Hon Jacinda Ardern stated that any Covid-19 vaccinations would not be forced.

Newshub article 22 September 2020: <https://www.newshub.co.nz/home/politics/2020/09/coronavirus-jacinda-ardern-confident-enough-kiwis-will-get-covid-19-vaccine-for-herd-immunity-without-being-forced-to.html>

44. Recall the NZ Government was by September negotiating contracts with Pfizer for COVID-19 mRNA Vaccination products – a [contract](#)⁵⁶ for 1.5 million doses was signed 12 October 2020. What is so special and or exceptional about COVID-19. Why did the government circumvent the relevant agency, Pharmac, and negotiate the still confidential contract with Pfizer? Public knowledge of the content of the contract, derived from viewing other similar agreements, cause a reasonable individual (and the Petitioner) to assert that; confidentially and privilege in respect to the terms of the contract, place the ministers of the crown, in conflict with their oaths of office, and fiduciary duty to the electorate.

45. Despite assertions that the Vaccine Passport system is a temporary measure to counter the scourge of the COVID-19 Pandemic, another prominent conspiracy theory is that the COVID-19 Vaccine Passport, is the forerunner of a [Global](#)⁵⁷ Identity and Health Security passport system. The Digital ID Trust Framework Bill currently before the House appears to be enabling the Global Identity and Health Security passport system.

46. The directives of mandatory vaccinations are clearly in contravention of NZ BORA and the **spirit of the law**. The issue of proportionality between the level of danger of contagion in the case of COVID-19 vis-à-vis a future pandemic can be dealt with as a “burden of proof” requirement - the State must prove the level of danger actually present through independent peer review. This was not done with COVID-19. To the contrary those sceptical of the official fear mongering, have done the research to prove as a FACT that, “COVID-19 Vaccination is a net [harm](#)”⁵⁸.

47. Why worry about this? Because of the legal principle of [precedent](#)⁵⁹—once a precedent is set for a single exception—and that exception is a low barrier, then the slippery slope of abuse of power is imminent. The danger inherent to the abuse of power is that incremental steps away from the spirit of law will lead to serious abuse, as demonstrated with COVID-19 Orders and Mandates. The point is to explicitly limit the arbitrary authority and power of the State to abrogate NZ BORA rights.

56 NZ Government contract with Pfizer for COVID-19 mRNA Vaccination products, for 1.5 million doses was signed 12 October 2020, TVNZ 12 October 2020:

<https://web.archive.org/web/20201012041410/https://www.tvnz.co.nz/one-news/new-zealand/government-signs-agreement-purchase-1-5m-covid-19-vaccines-enough-750k-people>

57 Essay on the Petitioner's Values-Compass Points in a Post Truth World blogger; “Why Vaccine Passports 101 - Is “papers please” a health or economic imperative?” makes case that the COVID-19 vaccine passports are forerunners and the thin edge of the wedge to a larger more controlling agenda being foisted upon “we the people” in undemocratic fashion and with nefarious intent: <https://values-compasspointsinaposttruthworld.blogspot.com/2021/11/why-vaccine-passports-101-is-papers.html>

58 “The narrative is falling apart, piece by piece” Steve Kirsh published 19 January 2022; Four (4) important new developments you should be aware of, including “The vaccines make you more likely to get COVID-19,” and; “The vaccines are not safe:” <https://stevekirsch.substack.com/p/the-narrative-is-falling-apart-piece>

59 Legal principal of precedent (Wikipedia) is critical to apprehend especially where a judgement is hostile to public interest or human rights: <https://en.wikipedia.org/wiki/Precedent>

48. Why have a Bill of Rights if it is worthless at protecting the natural person from arbitrary oppression? Better off without the pretense. Revert to the common law rights of man?

49. Which leads to the [section 5 Justified Limits](#)⁶⁰ clause in NZ BORA, which the courts to date in their consideration of COVID-19 matters, have invoked in order to abrogate the spirit of BORA.

5 Justified limitations

Subject to section 4, the rights and freedoms contained in this Bill of Rights may be subject only to such reasonable limits prescribed by law as can be demonstrably justified in a free and democratic society.

50. There is no logic that allows the Petitioner to accept, that mandatory vaccination is justified in a free and democratic society. Medical ethics, requires free and full consent for any medical procedure. Thus the various Orders and enactments, associated with the COVID-19 Public Health Response Act 2020 are **ultra vires**.

51. Appropriateness, proportionality, and FACTS must, at least, place the burden of proof (evidentiary requirements) on the State (whether as defendant or prosecutor) at a higher level than that of criminal law as the consequences observed in the arbitrary power exercised in the COVID-19 RESPONSE has cost lives, harmed liberty, and the NZ economy. Without enforcement requirements, the written law by itself, tends to be insufficient as a protection for civil and human rights, expressed in documents such as NZ BORA. In other words, the more the courts interpret the Law incorrectly, the less amenable to appeal and redress the civil and human rights become.

52. The Petitioner offers the amendment to section 5 BORA as an elegant solution to the problem so as to disallow the improper precedent. There may be other solutions, however, the Petition's amendment provides a solution that may apply in the near term.

Playing with words – once upon a time Pandemic meant Lethal

53. The Definition of **Pandemic**, **Vaccine** and **Herd Immunity** have been Altered. In recent years and months, the long-held definitions of these words have changed, with immense ramifications for public health policy in the midst of COVID-19;

Pandemic

⁶⁰ Section 5 Justified Limits clause in NZ BORA:

<https://www.legislation.govt.nz/act/public/1990/0109/latest/DLM225501.html>

54. WHO's original definition of a pandemic, from May 2009, specified simultaneous epidemics worldwide "with enormous numbers of deaths and illnesses"; this definition was changed in the month leading up to the 2009 swine flu pandemic, removing the severity and high mortality criteria; whereas, it used to be that a [pandemic](#)⁶¹ was:

An influenza pandemic occurs when a new influenza virus appears against which the human population has no immunity, resulting in several, simultaneous epidemics worldwide with enormous numbers of deaths and illness.

Vaccine

55. COVID-19 vaccines are technically gene therapies and did not meet the definition of vaccine, until Merriam-Webster's [vaccine](#)⁶² definition (hyperlink to web archive capture of vaccine definition from May 2020) was recently changed to — conveniently and coincidentally - to include a description of the experimental [gene therapies](#)⁶³.

56. COVID-19 vaccines are not conventional vaccines made with live or attenuated viruses. They are real "gene therapies." The Pfizer and Moderna vaccines are made with lipid nanoparticles that contain polyethylene glycol (PEG)8 and messenger RNA (mRNA). LNP have been identified as highly [inflammatory](#)⁶⁴. mRNA are snippets of genetic code that carry instructions for cells to produce proteins. The definition of "genetic" is: "relating to genes", and genes contain instructional code that tell the body what proteins to make. "Therapy" is defined as: the medical treatment of disease, so **mRNA vaccines are very clearly gene therapy**. This is a demonstrable FACT manifestly evident in mRNA gene therapy, and its [published](#)⁶⁵ development.

61 "The elusive definition of pandemic influenza" Peter Doshi published 31 March 2011: <https://web.archive.org/web/20121001101529/https://www.who.int/bulletin/volumes/89/7/11-086173/en/> which commences with the following under the heading Introduction; *In 2009, governments throughout the world mounted large and costly responses to the H1N1 influenza outbreak. These efforts were largely justified on the premise that H1N1 influenza and seasonal influenza required different management, a premise reinforced by the decision on the part of the World Health Organization (WHO) to label the H1N1 influenza outbreak a "pandemic". However, the outbreak had far less serious consequences than experts had predicted, a fact that led many to wonder if the public health responses to H1N1 had not been disproportionately aggressive. In addition, concern over ties between WHO advisers and industry fuelled suspicion about the independence and appropriateness of the decisions made at the national and international levels. Sound familiar?* History might not repeat however it seems to rhyme.

62 Webarchive capture Merriam-Webster's prior vaccine definition (16 May 2020), "Definition of vaccine: a preparation of killed microorganisms, living attenuated organisms, or living fully virulent organisms that is administered to produce or artificially increase immunity to a particular disease."

<https://web.archive.org/web/20200516104515/https://www.merriam-webster.com/dictionary/vaccine>
63 Merriam-Webster's contemporary vaccine definition includes mRNA injectables: <https://www.merriam-webster.com/dictionary/vaccine>

64 Paper "The mRNA-LNP platform's lipid nanoparticle component used in preclinical vaccine studies is highly inflammatory" (Dec 2021): <https://pubmed.ncbi.nlm.nih.gov/34841223/>

65 Paper "mRNA: Fulfilling the Promise of Gene Therapy" published August 2015: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4817894/>

57. The narrative according to the COVID-19 gods promotes mRNA Vaccination on the grounds of the popular opinion, that when using mRNA, unlike DNA, the stringent gene-therapy regulations are bypassed, because, mRNA does not integrate into the host genome. However, that false legalism only holds true in the US, whereas in Europe, any active pharmaceutical ingredient, which contains, or consists of a recombinant nucleic acid used in, or administered to human beings, falls under the scope of the regulation for advanced therapy medicinal products.

58. It is a FACT, that mRNA-based therapeutics are categorized as gene therapy, no matter what political alterations (non scientific or rushed for the benefit of an interest) are made to definitions or common knowledge prior to COVID-19. Consider the power of the lobby interest(s) to engineer the converging alterations to assist their enterprise. To assist thinking an extract from linked article; "Opportunities and Challenges in the Delivery of mRNA-Based Vaccines" [published](#)⁶⁶ 28 January 2020 on the cusp of the COVID-19 pandemic;

5. Conclusions and Future Perspectives

The field of mRNA-based therapeutics spans from protein replacement therapy and gene editing to vaccination. With the dozens of mRNA-based vaccine candidates currently in pre-clinical and clinical phases of development, it is evident that the mRNA-based vaccine technology is a promising tool for the development of novel therapeutic and prophylactic vaccines against infectious diseases and cancer. However, the multifarious obstacles associated with mRNA's extremely large size, charge, intrinsic instability, and high susceptibility to enzymatic degradation hamper the translation of mRNA-based therapeutics from the bench to the bedside. Therefore, the wider application of mRNA-based therapeutics is still limited by the need for improved vectors or drug delivery systems. Advanced delivery systems can be applied to overcome the poor stability, cell targeting, and translational efficiency of naked mRNA. However, many clinically tested mRNA vaccine candidates are formulated without any delivery system, which suggests a need for further improvement of delivery systems for mRNA vaccines. Presently, lipoplexes and lipid-based nanoparticles are mostly used for delivering mRNA. Additionally, polymers and lipid-polymer hybrid nanoparticles offer great promise in terms of safety, stability, high transfection efficiency, and low price. Continued advancement in mRNA formulation and delivery using different nanomaterials can improve the wider use of mRNA for the treatment and prevention of infectious diseases and cancers.

66 Paper "Opportunities and Challenges in the Delivery of mRNA-Based Vaccines" published 28 January 2020: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7076378/>

59. [Moderna's SEC filings](#)⁶⁷ specify and stress that the FDA considers its technology a "gene therapy technology," originally intended for cancer treatment. Its mechanism of action also confirms it to be gene therapy. The mRNA gene therapies currently being misleadingly marketed as "vaccines" turns one's cells into bioreactors that churn out viral proteins (S-spike protein is toxic and billions or trillions of them in one's blood vessels is tragic) to incite an immune response, and there's no off-switch.

Herd Immunity

60. From June 2020 to November 2020, WHO changed their definition of herd immunity, to imply that it's a concept that only applies to vaccination, not from naturally acquired or pre-existing immunity, gained from prior or cross infection.

61. In June 2020, WHO's definition of herd immunity, posted on one of their COVID-19 Q&A pages, was in line with the widely accepted concept that has been the standard for infectious diseases for decades. Here's what it [originally](#)⁶⁸ said;

What is herd immunity?

Herd immunity is the indirect protection from an infectious disease that happens when a population is immune either through vaccination or immunity developed through previous infection. This means that even people who haven't been infected, or in whom an infection hasn't triggered an immune response, they are protected because people around them who are immune can act as buffers between them and an infected person. The threshold for establishing herd immunity for COVID-19 is not yet clear.

62. Please note that, "immunity developed through previous infection", is the way it has worked since humans have been alive. One's immune system isn't designed to get vaccines. One's immune system has evolved to respond to external corporeal threat like infection. Response to an auto-antigen (mRNA and resultant S-spike protein) is novel, highly variable and unpredictable, whose long term consequences are unknown.

67 Moderna's SEC filing FORM S-1 REGISTRATION STATEMENT (November 2018) initial public offering of shares of Moderna's common stock: <https://www.sec.gov/Archives/edgar/data/1682852/000119312518323562/d577473ds1.htm> from the linked prospectus; "mRNA, the software of life - mRNA transfers the instructions stored in DNA to make the proteins required in every living cell. Our approach is to use mRNA medicines to instruct a patient's own cells to produce proteins that could prevent, treat, or cure disease. A schematic of the central role of mRNA in making proteins is shown in the figure below."

68 "WHO Changes Definition of Herd Immunity" Peter Gyel published 15 January 2021: <https://peterlegyel.wordpress.com/2021/01/15/who-changes-definition-of-herd-immunity/>

63. Following is the recent amended [definition and guidance](#)⁶⁹ from WHO;

What is 'herd immunity'?

'Herd immunity', also known as 'population immunity', is the indirect protection from an infectious disease that happens when a population is immune either through vaccination or immunity developed through previous infection. WHO supports achieving 'herd immunity' through vaccination, not by allowing a disease to spread through any segment of the population, as this would result in unnecessary cases and deaths.

Herd immunity against COVID-19 should be achieved by protecting people through vaccination, not by exposing them to the pathogen that causes the disease.

64. Three apparently coincidental definition alterations, in time for the created pandemic - the consequences for society being that, by adjusting public information, particular interests are favoured. Those engaged in the COVID-enterprise are attempting to change people's perception of what is true and not true, what is FACT and what is NOT FACT, and corrupting science in the process.

Definition alteration in the lead up to the COVID-19 Pandemic

65. Dr Antony Fauci and friends, at the Milken Institute October 2019 Future of Health Summit,⁷⁰ discuss the need for a universal [influenza](#)⁷¹ vaccine, to be delivered to all seven (7) billion people inhabiting the planet. It is fascinating to review this [video](#)⁷² segment, also C-Span [link](#)⁷³ of the one-hour panel discussion, and the stated object to create an **entity**

69 Coronavirus disease (COVID-19): Herd immunity, lockdowns and COVID-19" published 31 December 2020: <https://www.who.int/news-room/questions-and-answers/item/herd-immunity-lockdowns-and-covid-19>

70 Future of Health Summit 28-30 October 2019: <https://milkeninstitute.org/events/future-of-health-summit-2019/overview> extracted promo message is about leveraging tech to advance human health; "The Future of Health Summit brought together thought leaders and decision-makers to confront some of the world's most significant health challenges by matching human, financial, and educational resources with the most innovative and impactful ideas."

71 "Universal flu vaccine" Wikipedia: https://en.wikipedia.org/wiki/Universal_flu_vaccine extract; "A universal flu vaccine is a flu vaccine that is effective against all influenza strains regardless of the virus sub type, antigenic drift or antigenic shift. Hence it should not require modification from year to year. As of 2021 no universal flu vaccine had been approved for general use, several were in development, and one was in clinical trial."

72 "Universal Flu Vaccine" panel for 29 October 2019 Future of Health Summit, a short clip of key messages: <https://www.youtube.com/watch?v=KsCwPfsb7C4>

73 C-SPAN full video link to *Universal Flu Vaccine* panel discussion 29 October 2019 <https://www.c-span.org/video/?465845-1/universal-flu-vaccine> Health experts discussed the scientific and technological prospects of an effective universal influenza vaccine. Speakers included Dr. Anthony Fauci, director of the National Institute of Allergy and Infectious Diseases and Margaret Hamburg, former FDA commissioner. Panelists discussed the need for more funding for research, better collaboration between the private and government sectors, advances in technology in flu research and the goal of a universal flu vaccine. Their

that promotes, and works, for the deployment of a universal influenza vaccine, which employs a novel mRNA gene therapy technology, an event which occurred synchronous to the Wuhan flu outbreak, and the notorious [Event 201](#) coronavirus pandemic desktop simulation exercise in New York City 18 October 2019.⁷⁴

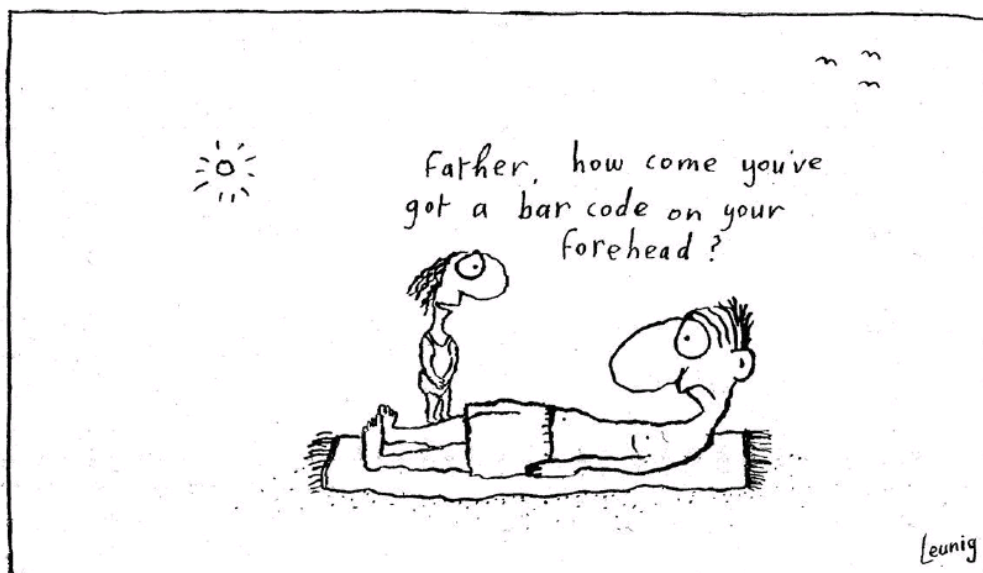


Illustration 1: Michael Leunig observation of the prophetic conspiracy theory written by John the Divine in the Book of Revelation 13:16 And he causeth all, both small and great, rich and poor, free and bond, to receive a mark in their right hand, or in their foreheads: 13:17 And that no man might buy or sell, save he that had the mark, or the name of the beast, or the number of his name.

75

object is to use novel mRNA gene therapy technology to create a universal influenza vaccine and just like Bill Gates says with a smirk; "We're going to have to Vaccinate everyone before we can return to normal."

74 Event 201 <https://centerforhealthsecurity.org/event201/> The Johns Hopkins Center for Health Security in partnership with the World Economic Forum and the Bill and Melinda Gates Foundation hosted Event 201, a high-level pandemic exercise on October 18, 2019, in New York, NY. The exercise illustrated areas where public/private partnerships will be necessary during the response to a severe pandemic in order to diminish large-scale economic and societal consequences. Is fairly perceptive given no prophecy was involved.

75 Illustration 1. Michael Leunig observation of the prophetic conspiracy theory written by John the Divine written in the Book of Revelation; 13:16 And he causeth all, both small and great, rich and poor, free and bond, to receive a mark in their right hand, or in their foreheads: 13:17 And that no man might buy or sell, save he that had the mark, or the name of the beast, or the number of his name. Source of Revelation 13:16-17: <https://www.kingjamesbibleonline.org/Revelation-13-16/> Prophecy in action or action in the World by Think Big Global Actors? What is NZ's role in prophecy - given her Christian spiritual principles?

66. That has worked out wonderfully well for some (with pecuniary interests), that COVID-19 happened, especially the Authoritarian Response demanding all are jabbed with the stuff of 2019's Big Pharma wet dream – now morphed into a COVID-19 Vaccination in lieu of a **universal influenza vaccine**. Why when the documentary movie [Plandemic](#) [Indoctrination](#)⁷⁶ referenced Event 201 the Covid narrative followers screamed “conspiracy theorist,” despite being FACTUAL. The **Vaccine** is a key to a particular future which has not been properly assessed, discussed and agreed in the democracy.

New Zealand Courts and Covid-19 Law

67. Several [cases](#)⁷⁷ have been before the NZ Courts, seeking declarations of inconsistency with NZBORA rights. Thus far, the courts have found for the defendant, the NZ Government, expressing the view that derogation from the rights provided under the sub-heading “Life and security of the person” is justified under the law, and relying on Section 5 BORA **Justified Limits**.

68. My discussion of the Law, suggest that the Justices' decisions, which rely on Sec 5 of BORA **Justified Limits**, is in contravention with common law and NZ's UN treaty commitments. On that point of The Law, [Sec 6](#)⁷⁸ makes plain the interpretation, the Parliament intended in 1990, when enacting the legislation.

6 Interpretation consistent with Bill of Rights to be preferred

Wherever an enactment can be given a meaning that is consistent with the rights and freedoms contained in this Bill of Rights, that meaning shall be preferred to any other meaning.

69. The LAW and its correct and just interpretation is primary. Individuals and nations ought be able to rely on consistent and just application of the Law. Otherwise the state is lawless.

70. Evidence of any definitive outcome to be known as FACT, with respect to the contested and controversial [politicised](#)⁷⁹ science of COVID-19, and its alleged cause,

76 Miki Willis documentary movie [Plandemic](#) Indoctrination (link to Plandemic series) this 10 minute clip features Event 201 video segments and more to highlight the prior knowledge of the coming pandemic: <https://www.bitchute.com/video/vc7hcN2SzXGZ/>

77 Courts of NZ COVID-19 matters and judgements: <https://www.courtsofnz.govt.nz/the-courts/high-court/covid-19-related-cases/>

78 Section 6 NZ BORA 1990: <https://legislation.govt.nz/act/public/1990/0109/latest/DLM225502.html>

79 “Covid-19: politicisation, “corruption,” and suppression of science” BMJ November 2020: <https://www.bmj.com/content/371/bmj.m4425> *When good science is suppressed by the medical-political complex, people die. Politicians and governments are suppressing science. They do so in the public interest, they say, to accelerate availability of diagnostics and treatments. They do so to support*

SARS-CoV-2 virus, and any antecedents and progeny variations, or experimental [vaccines](#)⁸⁰, and commercial patents undertaken, however known, is secondary to apprehending the Law as it relates to COVID-19. The evidence provides context for the proper interpretation of the Law.

71. The Four [Midwives](#)⁸¹ case heard on 8 November, with the judgement published 12 November 2021 by Justice Palmer, provides insight into the legal process of resolving what the law is. Justice Palmer states;

[1] Under the COVID-19 Public Health Response Act 2020 (the Act), the responsible Minister has made orders requiring individuals in certain occupations to be vaccinated against COVID-19. In this case, four midwives challenge the order relating to them. That challenge was heard together with the first cause of action brought by two incorporated societies, NZDSOS and NZTSOS (New Zealand Doctors and Teachers, respectively, Speaking Out with Science). They argue the COVID-19 Public Health Response (Vaccinations) Order 2021 (the Order) is not legally valid because the Act does not empower it to be made, if interpreted consistently with the right to refuse medical treatment under the New Zealand Bill of Rights Act 1990 (Bill of Rights) and the principle of legality. A second cause of action of NZDSOS and NZTSOS, that the Order is invalid because it is not a reasonable and justified limit on the right under s 5 of the Bill of Rights, has yet to be heard.

72. Sec 11 “Orders that can be made under this Act” of the COVID-19 Public Health [Response](#)⁸² Act 2020 was subsequently amended to include the requirement for certain

*innovation, to bring products to market at unprecedented speed. Both of these reasons are partly plausible; the greatest deceptions are founded in a grain of truth. But the underlying behaviour is troubling. **Science is being suppressed for political and financial gain. Covid-19 has unleashed state corruption on a grand scale, and it is harmful to public health.*** (Petitioner’s emphasis) *Politicians and industry are responsible for this opportunistic embezzlement. So too are scientists and health experts. The pandemic has revealed how the medical-political complex can be manipulated in an emergency—a time when it is even more important to safeguard science.*

80 “Diary of a Scientist in New Zealand” Guy Hatchard, 2 January, 2022: <https://hatchardreport.com/diary-of-a-scientist-in-new-zealand/> extracted opening; Updated 04 January 2022. Today I reviewed my 2021 diary and correspondence and had an aha moment. Up until September most of my exchanges and the press articles I read involved discussion and interpretation of the relative merits of published scientific papers. After that the official dialogue reported in the media subtly changed and started to assert that ‘science’ was on the side of vaccination without actually citing research papers—the merit of vaccination had become an accepted ‘fact’. In contrast after September the publishing of Covid-19 science papers picked up pace and they certainly weren’t supporting the government narrative. Scientifically speaking, the government narrative was becoming an embarrassment, but that did not in any way deter the media or the government and their advisors from deciding to rigidly enforce and support draconian vaccination mandates.

81 Courts of NZ “Four Midwives case” judgement by Justice Palmer, 12 November 2021: <https://www.courtsofnz.govt.nz/assets/cases/2021/2021-NZHC-3064.pdf>

82 “COVID-19 Public Health Response Act 2020,” is the enabling legislation for COVID-19 Orders: <https://legislation.govt.nz/act/public/2020/0012/latest/whole.html#LMS344177>

work to be undertaken by “COVID-19 vaccinated” persons through the COVID-19 Response ([Vaccinations](#)⁸³) Legislation Act 2021. That was not envisaged in the May 2020 enactment.

73. In the matter of application for Judicial Review between FOUR AVIATION SECURITY SERVICE EMPLOYEES, Applicants; and MINISTER OF COVID-19 RESPONSE, First Respondent; ASSOCIATE MINISTER OF HEALTH, Second Respondent, and ATTORNEY-GENERAL, Third Respondent - Justice Cooke found against the applicants, however, his [judgement](#)⁸⁴ bears consideration for its perspective of The Law, and relies on the FACT that Parliament made the law; **COVID-19 Public Health Response Bill** and resulting orders including the Order to Vaccinate Certain Workers and the **COVID-19 (Vaccinations) Legislation Act 2021**, which I expect the same Courts would assert is legitimate, given their pattern to date.

74. At paragraphs [31-36] of Justice Cooke's decision, he provides his opinion, as to why Section 10 NZ BORA, *the right not to be subjected to medical or scientific experimentation*, is not engaged. The Petitioner addresses the nature of the experiment elsewhere in this paper.

75. The above court cases, are an example of how the principle of precedent, becomes a “slippery slope” in the law, works against the spirit of the law and its intent, as memorialized in NZ BORA 1990. The Government has rammed a “low-level” precedent through Parliament, without the rigour of due process, then extended the scope through arbitrary Orders (without basis in science for justification) by enacting emergency rules, directions and mandates for COVID-19. Through the process of constraining the spirit of the law the State has “bulletproofed” a precedent and the courts have entrenched the interpretation, as defense against any appeal, or redress of the ‘emergency’ law. For the purposes of the COVID-19 Response, there is no separation of power between the Executive, Legislature, or the Judiciary.

76. Despite the utterances of the Law Lords in The Petitioner's earlier paragraphs 23-26, on the principle of rule of law, including from Justice Palmer, involved in the recent Covid judgments, no contemporary Judge appears to demonstrate a desire to apply The LAW.

77. The Court of Appeal Judgement in the Borrowdale case provides some light in regard to the written law to which New Zealand has affirmed in its Bill of Rights Act 1990. For convenience their paragraphs [109 and 110] again;

83 COVID-19 Response (Vaccinations1) Legislation Act 2021:

<https://legislation.govt.nz/act/public/2021/0051/latest/whole.html#LMS603407>

84 Four Aviation Security Service Employees vs Minister of COVID-19 Response and others” Justice Cooke:

<https://www.courtsofnz.govt.nz/assets/Uploads/2021-NZHC-3012.pdf>

[109] Certain rights may not be derogated. The rights in the ICCPR that are treated as being sacrosanct include the rights to life, religion, and freedom from torture and slavery. On the other hand, the rights to freedom of movement, assembly and association in arts 12, 21 and 22 of the ICCPR may be derogated.

[110] For completeness, we record the rights contained in the NZBORA include the right in s 8 not to be deprived of life. No counsel suggested the NZBORA right not to be deprived of life was engaged in this case. The position taken by counsel accurately reflects the narrow meaning that has been given to s 8 of the NZBORA.

78. The **slippery slope** is demonstrated, in effect, by the derogation from sections 8,9, 10 and 11 of NZ BORA in the cases cited above, which are pertinent to the spirit of the law. This reveals how the selective narrowing of the scope of the rule of law is applied when inconvenient to certain interest groups outside of the LAW; Corporations, and other abstract entities, which the Petitioner addresses below. These are inconsistencies that creep in and are then applied to rulings (Precedent), which negate the intent and spirit of the law, to the detriment of the interests of the people for whom the law is there to protect.

79. The LAW is, that there is no derogation from certain articles of the International Covenant on Civil and Political Rights (ICCPR) and more declarations, nor does common law allow derogation, nor charters of whatever form as they establish the Law [jus cogens](#)⁸⁵, or what is universally known and accepted as compelling law. Specifically Article 7 of the ICCPR:

Article 7

*No one shall be subjected to torture or to cruel, inhuman or degrading treatment or punishment. In particular, **no one shall be subjected without his free consent to medical or scientific experimentation.***

COVID-19 injectables are a science experiment

80. The official narrative refers to the Covid phenomena as novel. Without referring to any authority, we know that novel is new or unusual. A passage from a paper published in Vaccine, June 2020, Conference report; "Consensus summary report for CEPI/BC March 12–13, 2020 meeting: Assessment of risk of disease enhancement with COVID-19 [vaccines](#)⁸⁶"

85 Jus cogens (or ius cogens) is a latin phrase that literally means "compelling law:" <https://www.oxfordbibliographies.com/view/document/obo-9780199796953/obo-9780199796953-0124.xml>

86 Passage from a paper published in Vaccine, Volume 38, Issue 31, published 26 June 2020, Pages 4783-

*The SARS-CoV-2 S protein structure was solved shortly after its emergence and shows similar structure and mobility as the SARS-CoV-1 S [47]. The timing from first knowledge of SARS-CoV-2 to the beginning of the Phase 1 study was a remarkable sixty-five days. The advantages of mRNA vaccines include ability to create a highly precise type of protein to elicit the correct antibodies, to elicit T cell responses that are Th1 predominant, and the rapidity of manufacturing. **Of course, disadvantages include the novel nature of both mRNA and DNA vaccines without any licensed vaccine with either technology to date and lack of experience for mass production.** Therefore, multiple platforms for SARS-CoV-2 are under development that mitigate against some of the potential disadvantages of nucleic acid vaccines.*

81. Authors of the paper include the notorious [Ralph Baric](#)⁸⁷ and NZ vaccinologist Steven B.Black, Brighton Collaboration, Task Force for Global Health, collaborator with NZ vaccinologist **Helen Petousis-Harris** at the Brighton Collaboration. Petousis-Harris is author of a published paper; September 2020, on what is needed to [assess](#)⁸⁸ COVID-19 vaccine safety, as the vaccines are rolled out to the people of the world. This is how Helen Petousis-Harris approaches her work in theory, if not practice, 'Assessing the Safety of COVID-19 Vaccines'. In concluding her paper she outlines what was necessary for proper COVID-19 Vaccine [pharmacovigilance](#),⁸⁹

Challenges and Solutions for the Safe and Responsible Deployment of COVID-19 Vaccines

Too few countries have high functioning pharmacovigilance systems, and far fewer are able to undertake robust signal verification and post-licensure studies on safety. These countries will need to rely on data generated by those who do have the capability, perhaps placing some further ethical obligations on those countries who can, rather than rely on the predominant data contributions from Europe and the USA.

4791, Conference report; "Consensus summary report for CEPI/BC March 12–13, 2020 meeting: Assessment of risk of disease enhancement with COVID-19 vaccines"

<https://www.sciencedirect.com/science/article/pii/S0264410X2030709X?via%3Dihub>

87 Ralph Baric long term involvement in virus, including bat coronavirus gain of function research, and involvement with US military, and Chinese Institute of Virology: https://en.gmw.cn/2021-08/11/content_35072987.htm

88 Assessing the Safety of COVID-19 Vaccines: A Primer Helen Petousis-Harris, published 30 September 2020, within two weeks of the October 2020 contract, the NZ Government signed with Pfizer for 1.5 million doses of COMIRNATY: <https://link.springer.com/article/10.1007/s40264-020-01002-6>

89 WHO webpage, Regulation and Prequalification: *What is Pharmacovigilance?*: <https://www.who.int/teams/regulation-prequalification/regulation-and-safety/pharmacovigilance> Despite what might be offered on the page, the WHO Vigibase global database of individual case safety reports (ICSR), display tens of thousands dead, and millions injured, through AEFI/AESI/ICSR (all represent post medication adverse event).

Adverse events will coincide temporally with vaccine administration. Prior to the use of COVID-19 vaccines, it is important to understand the background rates of conditions that may be temporally associated with vaccine administration to be able to assess observed rates vs the expected rates. For most events, these rates are unknown and to further complicate matters the rates of many events, such as multiple sclerosis, vary by sex and geography. Developing background rates for COVID-19 vaccine AESIs for as many populations as possible is a matter of urgency.

Deploying any new vaccine based on data from expedited clinical trials into a population without a functioning safety monitoring system in place is reckless and irresponsible given the tools that are available. While there are international collaborations aimed at supporting coordinated efforts in COVID-19 vaccine safety assessments, vaccine nationalism and a lack of a globally coordinated vaccine safety effort could limit the potential in this space. Furthermore, deployment of vaccines before the successful completion of robust clinical programmes could threaten not only public confidence in COVID-19 vaccines but also immunisation programmes in general.

While the clinical testing of COVID-19 vaccines can be done robustly and assessment by regulatory agencies can be stringent, the vaccines are likely to be used under emergency conditions and the follow-up time from the trials will be minimal. Under such conditions, it is vital that the products are monitored (in near real time) for rare adverse events until risks can be either quantified or excluded (see Box for a case study). Only a few countries have the capability to conduct this monitoring [34] and even fewer are prepared with systems at the ready and baseline rates of AESIs established. There is an urgency to support as many sites as possible to prepare in collaboration with each other to actively monitor COVID-19 vaccines as they are deployed using common protocols so that data may be pooled, and rare events assessed in diverse populations.

*We have the tools to intensively monitor the safety of COVID-19 vaccines. While billions are being spent on the development and scale manufacturing of vaccines that have yet to demonstrate efficacy, with the exception of the European Union, there is limited investment in the post-licensure phase yet, which is inexpensive in comparison. **Failure to assess these vaccines for safety to our full ability is wrong.** As we well know from extensive experience, vaccine safety issues can threaten not only the success of any COVID-19 vaccine programme but also routine immunisation programmes. It is vital we get this right and we have the tools and the expertise to do so and to do it well. (Petitioner's emphasis)*

None of which have been satisfactorily established, in New Zealand.

82. The Petitioner has not heard that Helen Petousis-Harris called out Medsafe, nor the NZ Government, for failure to institute a competent and lawful pharmacovigilance program to oversight; the development, trial and marketing of COVID-19 Vaccines to the inhabitants of New Zealand.

83. North Carolina (NC) Citizens for Constitutional Rights (NCCCR), webpage essay about Ralph Baric, and his University of North Carolina Chapel Hill [biolab](#),⁹⁰ **Covid-19: Creation of a Bio-weapon. Ralph Baric and the Chapel Hill biolab feature prominently the novel background to the planned⁹¹ COVID-19 pandemic, extract from the essay;**

With every passing day, it is evident that not only was Covid-19 created in a lab, but whistleblowers, genetic fingerprints and the players involved demonstrate that it was also created as a bioweapon against humanity. But now we are seeing that the engineered virus was a dark genius to trick humanity into voluntarily taking the mRNA vaccine, which is having deadly effects globally. Statistics show that Covid-19 has about the same lethality as an annual flu except for the elderly with at least 2 morbidity factors. However, the shot, which is not a vaccine but a genetic experiment upon mankind has killed more people in less than 5 months than all the vaccines in the last 30 years combined. This injection is particularly dangerous for those under 20 years of age. The terror created by the globalists, when looked at logically, was apparently for depopulation, social control, and to bring in the "Great Reset" of humanity to usher in totalitarianism, and Artificial Intelligence—a "Terminator future".

It was after over 2 decades and over \$61 million in the making that Dr. Ralph Baric of UNC Chapel Hill, NC discovered how to advance the evolution of viruses by hundreds of thousands of years. All the while he and Fauci claimed the "Gain of Function" research, which makes viruses more deadly and contagious, was necessary "to be ready to combat a pandemic". The only problem with this claim is that the chimeric combining of deadly viruses in the lab, including HIV (AIDS), would never have been achieved in nature. Peter Daszic, formerly an eco-advocate found it more profitable in finding viruses in animals. He was funded by Fauci's NIH as an intermediary and then gave the funding to Baric, and Zhengli to dredge up potentially dangerous viruses from the animals, rather than simply helping them. This gave Fauci the plausible deniability to say he never funded the Wuhan Lab.

⁹⁰ North Carolina (NC) Citizens for Constitutional Rights (NCCCR) webpage essay about Ralph Baric his North Carolina Chapel Hill biolab; "Covid-19: Creation of a Bio-weapon, and NC's Role": <https://ncc4cr.com/2021/07/07/covid-19-creation-of-a-bio-weapon-and-ncs-role/>

⁹¹ ***If it looks like shit, smells like shit, and feels like shit, you don't have to actually eat it to know it's shit*** - Seth Eisenberg

Of the over \$61 million in grants, nearly \$52 million were from the Department of Defense (DOD) and the Department of Health and Human Services (DHHS). Others who also funded millions to these experiments were the National Science Foundation, Dept. of Homeland Security, Department of Commerce, US Dept. of Agriculture, and the Department of the Interior. The Department of Defense not only sent almost \$39 million alone, they also gave a military advisor, David France, former Deputy Commander at Ft. Dietrich. This notorious facility is our foremost biological weapons facility and has been named in many questionable events. It is hard to see how all these actors "played doctor and scientist" for the benefit of humanity.

The Obama administration suspended this research as too dangerous and unnecessary in 2014 after a series of lab accidents at the CDC in Atlanta. Curiously, Obama lifted the ban just 11 days before Trump took office and Fauci never reported this to any Trump officials. Is it any coincidence that 3 years later a pandemic struck the world, with the same viruses they were experimenting with?

84. Gain of function⁹² research into bat coronaviruses was being conducted in both the US and China (also Canada, France and Australia and more were/are associated). Common to all, is the interests of big pharma, the military complex's biological weapons development programs and US Health funding agencies, particularly NIAID and NIH.

85. Previously a positive case of an infectious disease required clinical diagnosis, whereas with COVID-19 all that is required is a positive PCR test. It is well established that the PCR test is not⁹³ fit for purpose. The United States Centers for Disease Control and Prevention (US CDC), has changed their COVID-19 test protocols from 31 December 2021.

92 "Military Documents About Gain of Function Contradict Fauci Testimony Under Oath" Project Veritas published 10 January 2022: <https://www.projectveritas.com/news/military-documents-about-gain-of-function-contradict-fauci-testimony-under/> extract; Project Veritas has obtained startling never-before-seen documents regarding the origins of COVID-19, gain of function research, vaccines, potential treatments which have been suppressed, and the government's effort to conceal all of this. Gain of function, Wikipedia: https://en.wikipedia.org/wiki/Gain-of-function_research

93 Review report Corman-Drosten et al. Eurosurveillance 2020 November 27, 2020; "External peer review of the RTPCR test to detect SARS-CoV-2 reveals 10 major scientific flaws at the molecular and methodological level: consequences for false positive results:" <https://comandrostenreview.com/report/> extracted part introduction; "This paper will show numerous serious flaws in the Corman-Drosten paper, the significance of which has led to worldwide misdiagnosis of infections attributed to SARS-CoV-2 and associated with the disease COVID-19. We are confronted with stringent lockdowns which have destroyed many people's lives and livelihoods, limited access to education and these imposed restrictions by governments around the world are a direct attack on people's basic rights and their personal freedoms, resulting in collateral damage for entire economies on a global scale. **There are ten fatal problems with the Corman-Drosten paper which we will outline and explain in greater detail in the following sections.**" (emphasis from the paper)

86. Medsafe's 2 February 2021 Agenda for the [109th](#)⁹⁴ meeting of the Medicines Assessment Advisory Committee considered the Pfizer COMIRNATY Vaccine;

4.1 Comirnaty (COVID-19 mRNA vaccine), 0.5 mg/mL (TT50-10853) Pfizer New Zealand Limited

*The product is a prescription medicine proposed for **prevention** of COVID-19 disease caused by SARS-CoV-2 in adults and adolescents from 16 years of age and older.*

*Comirnaty is a new vaccine employing a novel technology (mRNA) and works by triggering the immune system to **protect** against COVID-19 disease.*

*The **application was received by Medsafe on 13 November 2020**. The application has undergone **one round of request for information**. The application is being considered for provisional consent under section 23 of the Medicines Act 1981 with proposed conditions.*

*The application is being referred to the Committee for **independent advice** as to whether the Minister of Health should grant provisional consent for the proposed indications. The Committee is also asked to consider the **appropriateness of the conditions proposed for consent**. (Petitioner's emphasis)*

87. Where Medsafe's Medicines Assessment Advisory Committee, states in its 2 February 2021 meeting agenda that; **"Comirnaty is a new vaccine employing a novel technology (mRNA) and works by triggering the immune system to protect against COVID-19 disease,"** it is ludicrous for anyone in Authority to state that, "COVID-19 mRNA Vaccine products are well understood, proven safe or effective". Any such utterance is mere opinion, without the benefit of long term data and observation of its effects both beneficial, and injurious.

88. The FACT is, the longer the COVID-19 Vaccination experiment continues, the more evidence of its high risk of injury and death, is proven amongst recipients, as well as, its uselessness as a curative tool for the COVID-19 Pandemic, becomes plain.

89. Medsafe's Medicines Assessment Advisory Committee, must have recommended provisional approval of the novel technology (mRNA) COMIRNATY Vaccine, at its 2 February 2021 meeting, as verification of COMIRNATY's Provisional Approval was [Gazetted](#), 3 February 2021.⁹⁵

94 Medsafe's 2 February 2021 Agenda for the 109th meeting of the Medicines Assessment Advisory Committee: <https://www.medsafe.govt.nz/committees/maac/Agenda109-2Feb21.htm>

95 Medsafe/NZ Government Section 23(a) Medicines Act 1981, Provisional Approval of Pfizer (mRNA) COMIRNATY Vaccine Provisional Approval was Gazetted 3 February 2021:

90. The prior record for developing a vaccine is about 5 years for an [Ebola](#)⁹⁶ inoculation, and prior to that, it is closer to 10 years, factoring long term trials for safety and efficacy to determine the risk of the vaccine compared to any benefit. A mumps vaccine might have been released to market after 4 years of trials. Previously, it only required relatively few deaths or injuries to be recorded, for regulators to withdraw a vaccine from the market. No Vaccine is SAFE; in either the general or legal dictionary definition – they all carry some [risk](#)⁹⁷ of injury or death. COVID-19 Vaccines are positively implicated in the deaths of many [thousands](#) of people, and an unknowable number more.⁹⁸ As of 1 Feb 2022) there are in the order of fifty-sixty (50-60) people who have died from COVID-19 symptoms or were PCR test positive but died for other commorbidity reasons.⁹⁹

91. The critical importance of the Deoxyribonucleic acid (DNA) to human beings, animal, and plant life is apprehended generally by most. The [science](#)¹⁰⁰ is still unsettled as to how DNA works, relates, repairs, and replicates. DNA is a molecule composed of two polynucleotide chains, that coil around each other to form a double helix, carrying genetic instructions for the development, functioning, growth, and reproduction of all known organisms, and many viruses. DNA and ribonucleic acid are nucleic acids.

92. Any therapeutic that impacts DNA functioning in human beings, is problematic – particularly where it is poorly comprehended, or where, the FACT of [DNA alteration](#),¹⁰¹ as a

<https://gazette.govt.nz/notice/id/2021-go338>

96 History of Ebola vaccine, Wikipedia: https://en.wikipedia.org/wiki/Ebola_vaccine

97 "Vaccine Side Effects and Adverse Events" A vaccine is a medical product. Vaccines, though they are designed to protect from disease, can cause side effects, just as any medication can: <https://www.historyofvaccines.org/content/articles/vaccine-side-effects-and-adverse-events> extracted; *How Are Adverse Events Monitored? VAERS The CDC and FDA established The Vaccine Adverse Event Reporting System in 1990. The goal of VAERS, according to the CDC, is "to detect possible signals of adverse events associated with vaccines." (A signal in this case is evidence of a possible adverse event that emerges in the data collected.) About 30,000 events are reported each year to VAERS. Between 10% and 15% of these reports describe serious medical events that result in hospitalization, life-threatening illness, disability, or death. To date there are over 1 million AEFI reports on VAERS <https://openvaers.com/covid-data> and 732,882 in the US alone through 14 January 2022.*

98 Who knows? A video presentation, of a statistical perspective that implicates the COVID-19 Vaccine project of 2021 and more COVID-19 Response policies, lead to a positive spike of ~2000 deaths in excess mortality over the previous decade, with the exception of the severe influenza seasons of 2017-2019. **2021 Year of the Vaccine in graphs** Grant is an independent film and television documentary maker: <https://www.bitchute.com/video/dASUoQ92PTbD/> 2021 excess mortality over 2020 the year of the pandemic is over 2000 more.

99 What's a good ratio for harm versus benefit? 2000:50? Also NZ Economy gross ht from COVID-19 Response measures must be north of NZD\$100 billion whereas the price of the vaccines is just short of NZD\$1 billion. Whereas the early treatment alternative strategy for dealing with Covid-flu is to treat the symptoms of those ill and get on with it.. the price of doing that is about the price of a regular severe influenza season and everyone gets to live their lives and no harm done.

100 "Seven Characteristics of DNA You May Not Know About" Guy Hatchard, 9 January 2022:

<https://hatchardreport.com/seven-characteristics-of-dna-you-may-not-know-about/>

101 "SARS-CoV-2 Spike Impairs DNA Damage Repair and Inhibits V(D)J Recombination In Vitro" published October 2021: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8538446/> part of the Abstract; *Here, by using an in vitro cell line, we report that the SARS-CoV-2 spike protein significantly inhibits DNA damage repair, which is required for effective V(D)J recombination in adaptive immunity. Mechanistically, we found that the spike protein localizes in the nucleus and inhibits DNA damage repair by impeding key DNA*

result of viral disease, or the damaging effect of corresponding gene therapy inputs, is denied by public experts, who misrepresent the science. It is well comprehended; the deleterious action of ionising radiation, and more toxins on [DNA integrity](#).¹⁰²

93. For context in respect to the novel nature of mRNA Vaccines, prior to its Covid-19 [mRNA-1273](#)¹⁰³ injectable [Moderna](#),¹⁰⁴ had [not](#) produced a marketable product.¹⁰⁵ It was supported for more than 10 years, spending money on research into mRNA [gene therapy](#) technology.¹⁰⁶

94. The Pfizer injectable has NOT gone through extensive testing for safety trials, to gauge long term safety concerns, before mass marketing to, and imposition (mandates, coerced or forced Vaccination) upon the human population. Pfizer's own data confirms its deadly safety profile.

95. To satiate the COVID-19 narrative imperative, Authorities require that individuals; "Get Vaccinated". Authorities require individuals to waive their rights, or You as the NZ Parliament Representatives, legislate away a person's "innate right to bodily integrity", protected and provided for in the text of the ***Universal Declaration on Bioethics***¹⁰⁷ and ***Human Rights*** (UDBHR) agreed 19 October 2005. Extracted Articles 1-6 and so you know the Law already written:

General Provisions

repair protein BRCA1 and 53BP1 recruitment to the damage site. Our findings reveal a potential molecular mechanism by which the spike protein might impede adaptive immunity and underscore the potential side effects of full-length spike-based vaccines.

102 It is clear that mRNA epigenetics is in its infancy. The use of an mRNA based gene therapy is as intellectually concerning as it is plain frightening, given the lack of detailed knowledge of the epigenetic modulation of RNA and its implications in human disease. One is inclined to think of Victorian brain surgery. "This review will provide an overview of recent advances in the emerging field of RNA epigenetics, specifically the role of RNA modifications and RNA modifying proteins in chromatin remodeling, transcription activation and RNA processing, as well as translational implications in human diseases." <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8145807/>

103 "Moderna nears its first-ever FDA authorization, for its COVID-19 vaccine" published 16 December 2020: <https://www.marketwatch.com/story/moderna-nears-its-first-ever-fda-authorization-for-its-covid-19-vaccine-11608134670>

104 "3 Red Flags for Moderna's Potential Coronavirus Vaccine" published 29 August 2020, *Moderna's candidate is exciting, but the company's circumstances are far from perfect*: <https://www.fool.com/investing/2020/08/29/3-red-flags-for-modernas-potential-coronavirus-vac/>

105 "Scientists Raise Questions About Moderna Vaccine In Market-Shaking Report" published 19 May 2020: <https://www.forbes.com/sites/alexandrasternlicht/2020/05/19/scientists-raise-questions-about-moderna-vaccine-in-market-shaking-report/?sh=6bc4c4502136>

106 "We Had the Vaccine the Whole Time" published 7 December 2020: <https://nymag.com/intelligencer/2020/12/moderna-covid-19-vaccine-design.html> extract; *You may be surprised to learn that of the trio of long-awaited coronavirus vaccines, the most promising, Moderna's mRNA-1273, which reported a 94.5 percent efficacy rate on November 16, had been designed by January 13. This was just two days after the genetic sequence had been made public in an act of scientific and humanitarian generosity that resulted in China's Yong-Zhen Zhang's being temporarily forced out of his lab. In Massachusetts, the Moderna vaccine design took all of one weekend.*

107 "Universal Declaration on Bioethics and Human Rights" Agreed 19 October 2005, and in force from 2007: http://portal.unesco.org/en/ev.php-URL_ID=31058&URL_DO=DO_TOPIC&URL_SECTION=201.html

Article 1 – Scope

1. This Declaration addresses ethical issues related to medicine, life sciences and associated technologies as applied to human beings, taking into account their social, legal and environmental dimensions.

2. This Declaration is addressed to States. As appropriate and relevant, it also provides guidance to decisions or practices of individuals, groups, communities, institutions and corporations, public and private.

Article 2 – Aims

The aims of this Declaration are:

(a) to provide a universal framework of principles and procedures to guide States in the formulation of their legislation, policies or other instruments in the field of bioethics;

(b) to guide the actions of individuals, groups, communities, institutions and corporations, public and private;

(c) to promote respect for human dignity and protect human rights, by ensuring respect for the life of human beings, and fundamental freedoms, consistent with international human rights law;

(d) to recognize the importance of freedom of scientific research and the benefits derived from scientific and technological developments, while stressing the need for such research and developments to occur within the framework of ethical principles set out in this Declaration and to respect human dignity, human rights and fundamental freedoms;

(e) to foster multidisciplinary and pluralistic dialogue about bioethical issues between all stakeholders and within society as a whole;

(f) to promote equitable access to medical, scientific and technological developments as well as the greatest possible flow and the rapid sharing of knowledge concerning those developments and the sharing of benefits, with particular attention to the needs of developing countries;

(g) to safeguard and promote the interests of the present and future generations;

(h) to underline the importance of biodiversity and its conservation as a common concern of humankind.

Principles

Within the scope of this Declaration, in decisions or practices taken or carried out by those to whom it is addressed, the following principles are to be respected.

Article 3 – Human dignity and human rights

1. Human dignity, human rights and fundamental freedoms are to be fully respected.

2. The interests and welfare of the individual should have priority over the sole interest of science or society.

Article 4 – Benefit and harm

In applying and advancing scientific knowledge, medical practice and associated technologies, direct and indirect benefits to patients, research participants and other affected individuals should be maximized and any possible harm to such individuals should be minimized.

Article 5 – Autonomy and individual responsibility

The autonomy of persons to make decisions, while taking responsibility for those decisions and respecting the autonomy of others, is to be respected. For persons who are not capable of exercising autonomy, special measures are to be taken to protect their rights and interests.

Article 6 – Consent

*1. **Any preventive, diagnostic and therapeutic medical intervention is only to be carried out with the prior, free and informed consent of the person concerned, based on adequate information.** The consent should, where appropriate, be express and may be withdrawn by the person concerned at any time and for any reason without disadvantage or prejudice.*

*2. **Scientific research should only be carried out with the prior, free, express and informed consent of the person concerned.** The information should be adequate, provided in a comprehensible form and should include modalities for withdrawal of consent. Consent may be withdrawn by the person concerned at any time and for any reason without any disadvantage or prejudice. Exceptions to this principle should be made only in accordance with ethical and legal standards adopted by States, consistent with the principles and provisions set out in this Declaration, in particular in Article 27, and international human rights law.*

*In appropriate cases of research carried out on a group of persons or a community, additional agreement of the legal representatives of the group or community concerned may be sought. **In no case should a collective community agreement or the consent of a community leader or other authority substitute for an individual's informed consent.*** (Petitioner's emphasis)

96. The Law, plus the evidence in this Petitioner's paper, read in conjunction with the Universal Declaration on Bioethics and Human Rights, and more publicly available information and scientific knowledge, including COVID-19 early treatment therapies denied, dispose of all justification for the forced vaccination of anyone with novel gene therapy products.

97. The COVID-19 mRNA Vaccination trial, is a live trial amongst the human population of the planet and because of its scale, the experienced or realised and potential damage; injury and death, from the Experiment is enormous and ongoing, with consequences both known, and for lack of long term data, unknown, as more individuals are 'Vaccinated against COVID-19.' Potential harm and injury is yet to be experienced, so unknowable.

98. We may extrapolate from research findings of the pathogenesis, and likely long term implications, and harm, to apprehend the enormity of, "the numbers harmed or killed, caused by COVID-19 Vaccination."

Vaccinating Children is all risk and no benefit

99. From 17 January, 2022 the NZ Government [authorised](#)¹⁰⁸ COVID-19 Vaccination with the experimental Pfizer COMIRNATY mRNA gene therapy injectable on the most vulnerable and unprotected members of society, children [5-11](#)¹⁰⁹ year old. Whereas, persons under the age of 16, have no right of consent under the law. Despite the [Law](#),¹¹⁰

¹⁰⁸<https://www.medsafe.govt.nz/COVID-19/Comirnaty-Gazette-Dec-2021.pdf> extract; Pursuant to section 23(1) of the Medicines Act 1981, the Minister of Health hereby provisionally consents to the sale, supply or use in New Zealand of the new medicines set out in the Schedule hereto: Product **Comirnaty (30mcg/0.3mL dose)** Active Ingredient: Tozinameran 0.1mg/mL Pfizer New Zealand Limited, and; **Comirnaty (10mcg/0.2mL dose)** Active Ingredient: Tozinameran 0.1mg/mL Pfizer New Zealand Limited. Provisional consent is granted until 3 November 2023.

¹⁰⁹Government confirms COVID-19 vaccinations to protect tamariki" Hon Chris Hipkins 21 December 2021: <https://www.beehive.govt.nz/release/government-confirms-covid-19-vaccinations-protect-tamariki> extract; COVID-19 Response Parents and caregivers will have the opportunity to protect their children aged 5 to 11 against COVID-19 with the child version of the Pfizer vaccine, COVID-19 Response Minister Chris Hipkins confirmed today. "This will happen from 17 January. There are 476,000 children between ages 5-11 who will become eligible to get their first dose from this date, and their second dose at least eight weeks later. How many young girls and boys must die or be injured (some for life) to satisfy the COVID-19 Vaccine god who lusts for blood and harm and hates freedom and truth?

¹¹⁰Ministry of Justice webpage of the "Care of Children" <https://www.justice.govt.nz/family/care-of-children/parenting-and-guardianship/childrens-rights-and-guardianship/> Specifies that a child cannot provide legal consent to a medical intervention till aged sixteen (16).

young New Zealanders 5-11 year olds and/or their parents, are coerced to inject their young ones, with the experimental treatment that has no [etiology](#)¹¹¹, no animal testing, little preliminary testing, and little proven curative effect. The relative therapeutic effect is claimed to be ~95%, which is a negligible 0.7% absolute effect. This requires an astronomical number to be vaccinated to attain any statistical benefit, however, COVID-19 Vaccination involves a significant risk of harm or death. Knowing the FACT that the risk of harm is real, the Government and Representatives, affirmed by various Acts of NZ Parliament, have mandated that individual citizens, persons and classes of persons in employment, must accept the known (and yet to be known, so unknown) risk of harm to be VACCINATED,¹¹² to participate in the 'new world order' being created at the behest of foreign powers, and despite any previous reasonable interpretation of New Zealand LAW.

100. Ministry of Justice website on the "Care of Children" provides the following [advice](#)¹¹³ in respect to a child's legal right to make a decision in regard to any medical procedure, extract;

When a child can legally agree to medical procedures

Once they are 16, children can decide for themselves whether they want to consent (agree) to any medical treatment, operation, dental procedure or blood transfusion. This right to give consent also includes the right to refuse consent.

101. Ministry of Health and Office of the Children's Commissioner, uses Gillick competency and fudge the issue of the child's legal, or lawful, right to consent,¹¹⁴ whereas the Care of Children Act 2004,¹¹⁵ **section 36, Consent to procedures generally**, provides

111 Definition of etiology: <https://www.merriam-webster.com/dictionary/etiology> 1: CAUSE, ORIGIN specifically : the cause of a disease or abnormal condition; and/or, 2: a branch of knowledge concerned with causes specifically : a branch of medical science concerned with the causes and origins of diseases

112 What is it that is so important that New Zealand has to take a hit in every way in order to coerce the citizens to participate in the COVID-19 experiment and submit to being VACCINATED? Vaccination with novel mRNA and more versions of S-spike injectables (viral vector) to counter COVID-19 involve significant risks with outcomes as extreme as death or severe disability with no likely cure. There's an element of Russian Roulette involved, for those who know the risk, however, who are forced by their circumstance to be VACCINATED – what a terrible or awful feeling and sense of invasion or rape for those assaulted with the needle full of experimental product, which has a known set of adverse effects that are listed over nine pages of a post marketing adverse event AESIAEFI report from April 2021, just a few months into the Vaccinate the World project. Why???

113 Ministry of Justice website; "Care of Children: Children's rights and guardianship:" <https://www.justice.govt.nz/family/care-of-children/parenting-and-guardianship/childrens-rights-and-guardianship/> Extract; *When a child can legally agree to medical procedures: Once they are 16, children can decide for themselves whether they want to consent (agree) to any medical treatment, operation, dental procedure or blood transfusion. This right to give consent also includes the right to refuse consent.*

114 Office of the Children's Commissioner webpage with regard to Children's Health Rights and informed consent: <https://www.occ.org.nz/childrens-rights-and-advice/health-rights/> Extract on children's consent; *Can my child say no to medical treatment? There's no specific age at which a child or young person has the right to consent to having treatment. When they're making a decision about consent, medical professionals will look at lots of factors, including the circumstances and the child's level of understanding and maturity.*

115 Care of Children Act 2004, **section 36 Consent to procedures generally**:

that a child or person who attains the age of 16 has the same right to consent to medical intervention as would an adult person – not before.

102. The inconsistency between practice and law might lead to tort law action, where children have been COVID-19 Vaccinated and injured, where they were under the legal age to engage the right to medical consent, which is sixteen (16) years of age.

103. The COVID-19 Vaccination pushes an experimental, and risky product, on to the NZ Government's most vulnerable constituency. Advocacy for the COVID-19 Vaccines for children, is the most egregious quackery imaginable, and all of it rushed as an emergency, despite the FACT that children are in no danger of being infected with COVID, as all statistical analysis has proven¹¹⁶.

104. Serious medical malpractice is being condoned, and carried out by the NZ Government, on behalf of their political donors, or whomever is promoting the *vaccinate the world project*, and to the detriment of children's health and well-being, as well as that of their parents. The NZ Government is condemning children, ***to be subjected to being nothing more than guinea pigs for Corporate profits***, since there is no clear and present danger of COVID-19 contagion to them. MPs ought be aware that governments around the world, were made liable after the Thalidomide¹¹⁷ fiasco of the 1950s and 1960s, not just private corporations.

105. The Petitioner senses that it will be a sad day for many families, as they live through the experience of their harmed and killed sons and daughters.¹¹⁸ Will YOU explain to the

<https://www.legislation.govt.nz/act/public/2004/0090/latest/DLM317462.html> Confirms the age of children's right to consent as 16 years.

¹¹⁶ NZ Doctors Speak Out With Science essay; "Reasons for Not Injecting Children" published 6 January 2022: <https://nzdsos.com/2022/01/06/reasons-for-not-injecting-children/> Second reason given; 2. *Some children will likely die or be permanently injured from these vaccines, based on the use in children aged 12-16. In the 5 months prior to 22 October 2021 there were 128 reports to VAERS of fatal side effects. It has been calculated that for every one child saved by the shot, another 117 would be killed by the shot.* Not the sort of risk to be imposing on parents without providing them with all the facts including the First reason; *The risks demonstrably outweigh the benefits of COVID vaccinations for young children. Deaths and hospitalisations in children (from Covid 19) are rare and have been inflated inaccurately. Children ages 5 to 11 are at extremely low risk of death from coronavirus. In a meta-analysis combining data from 5 studies, Stanford researchers Cathrine Axfors and John Ioannidis found a median infection fatality rate (IFR) of 0.0027% in children ages 0-19. In children ages 5 to 11 the IFR is even lower. Depending on the study one looks at, COVID-19 is slightly less dangerous or roughly equivalent to the flu in children.*

¹¹⁷ Thalidomide scandal Wikipedia page for a summary of the lack of proper safety trials prior to rushed approval and marketing to a credulous public of expectant mums who just wanted relief from morning sickness. Unfortunately they found the drug disabled and stunted their child's development. Governments became party to the liability for injury and harm and the resultant settlements to the victims and their families: https://en.wikipedia.org/wiki/Thalidomide_scandal

¹¹⁸ "Why are we vaccinating children against COVID-19?" 14 September 2021 <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8437699/> Very considered about what a vaccine is and isn't; *A vaccine is legally defined as any substance designed to be administered to a human being for the prevention of one or more diseases. For example, a January 2000 patent application that defined vaccines as "compositions or mixtures that when introduced into the circulatory system of an animal will evoke a protective response to a pathogen."* was rejected by the U.S. Patent Office because "The

parents of the injured and dead young persons, the true reason you legalised death and destruction?

106. The NZ Government, intends expanding injection with the Pfizer COMIRNATY mRNA product, to young persons down to the age of 6 months. The Petitioner views those who would COVID-19 Vaccinate NZ's youth and children as malevolent actors and/or willfully blind,¹¹⁹ to the harm perpetrated through the **COVID-19 Vaccinate everyone** project.

107. Medical ethics is rooted in the ground of "first do no harm!"¹²⁰

Liability for COVID-19 Vaccination Harm and Injury

108. Those carrying out these Draconian measures; Members of NZ Parliament, individuals, public servants, and employers directing COVID-19 Vaccination of their employees, are liable for the resultant harm and injury, death and illness. COVID-19 Vaccination is an unwarranted, and unnecessary experiment that has and will cause enormous harm.

immune response produced by a vaccine must be more than merely some immune response but must be protective. As noted in the previous Office Action, the art recognizes the term "vaccine" to be a compound which prevents infection". In the remainder of this article, we use the term 'inoculated' rather than vaccinated, because the injected material in the present COVID-19 inoculations prevents neither viral infection nor transmission. Since its main function in practice appears to be symptom suppression, it is operationally a "treatment". In the USA, inoculations were administered on a priority basis. Initially, first responders and frontline health workers, as well as the frailest elderly, had the highest priority. Then the campaign became more inclusive of lower age groups. Currently, approval has been granted for inoculation administration to the 12–17 years demographic, and the target for this demographic is to achieve the largest number of inoculations possible by the start of school in the Fall. The schedule for inoculation administration to the 5–11 years demographic has been accelerated to start somewhere in the second half of 2021, and there is the possibility that infants as young as six months may begin to get inoculated before the end of 2021. The remainder of this article will focus on the USA situation, and address mainly the pros and cons of inoculating children under eighteen.

119 "Willful blindness" definition: <https://definitions.uslegal.com/w/willful-blindness/> is no defence in law. Also "The dangers of willful blindness" TED talk by Margaret Heffernan March 2013:

https://www.ted.com/talks/margaret_heffernan_the_dangers_of_willful_blindness about; Gayla Benefield was just doing her job -- until she uncovered an awful secret about her hometown (toxic effects of the local Vermiculite mine and process) that meant its mortality rate was 80 times higher than anywhere else in the US. But when she tried to tell people about it, she learned an even more shocking truth: People didn't want to know. In a talk that's part history lesson, part call-to-action, Margaret Heffernan demonstrates the danger of willful blindness, and praises ordinary people like Benefield who are willing to speak up.

120 Primum non nocere is a Latin phrase that means "first, do no harm". The phrase is sometimes recorded as primum nil nocere: https://en.wikipedia.org/wiki/Primum_non_nocere Extract; *Non-maleficence, which is derived from the maxim, is one of the principal precepts of bioethics that all students in healthcare are taught in school and is a fundamental principle throughout the world. Another way to state it is that, "given an existing problem, it may be better not to do something, or even to do nothing, than to risk causing more harm than good." It reminds healthcare personnel to consider the possible harm that any intervention might do. It is invoked when debating the use of an intervention that carries an obvious risk of harm but a less certain chance of benefit. Non-maleficence is often contrasted with its corollary, beneficence.*

109. The Treasury of the NZ Crown and particularly egregious actors, leading the **Vaccinate everyone** project, are liable for thousands of tort cases, when the Pfizer Comirnaty COVID-19 product (and more Vaccines), is proved to be ineffective, or useless, and pernicious in that it causes harm, injury and death.

110. Legal actions are already initiated in national and international jurisdictions. More will follow. The [statute](#)¹²¹ for the International Criminal Court (ICC), declares that; *The ICC is intended to complement, not to replace, national criminal systems; it prosecutes cases only when a State is unwilling or unable genuinely to carry out the investigation or prosecution* (Article 17(1)(a)) extracted article text;

The case is being investigated or prosecuted by a State which has jurisdiction over it, unless the State is unwilling or unable genuinely to carry out the investigation or prosecution;

111. The Petitioner provided a detailed report to the NZ Police, 30 October 2021. The report forwarded evidence of culpable homicide in the case of the death, of several hundred individuals following COVID-19 Vaccination, and harm in respect to thousands injured post injection with COVID-19 Vaccine products. **[Case to NZ Police report 30 October 2021, attached Addendum A]**

112. Technological innovation has offered new platforms and vectors including mRNA gene therapy, for medical and scientific intervention in human beings. With any technology, the ethical and real implications must be properly considered to enable proper comprehension of risk versus benefit of the treatment or experiment. Every day that passes, brings to the fore more damning evidence of the toxicity and harm caused by COVID-19 Vaccination.

113. FACT is there are more risks than benefits from COVID-19 Vaccination. The novelty and rush to **get everyone Vaccinated**, is *prima facie* evidence of "bad faith" on the part of the NZ Govt. The [precautionary principle](#)¹²² has been trashed. Consider the furore in the early days of genetic engineering (GE) and genetically modified organisms (GMOs), when many in the NZ public, refused to consider the growing of, or importing anything GMO for

121 Rome Statute establishing the International Criminal Court: <https://legal.un.org/icc/statute/rome.htm>

122 "Precautionary Principle" Wikipedia: https://en.wikipedia.org/wiki/Precautionary_principle nuanced perspective; *The principle is often used by policy makers in situations where there is the possibility of harm from making a certain decision (e.g. taking a particular course of action) and conclusive evidence is not yet available. For example, a government may decide to limit or restrict the widespread release of a medicine or new technology until it has been thoroughly tested. The principle acknowledges that while the progress of science and technology has often brought great benefit to humanity, it has also contributed to the creation of new threats and risks. It implies that there is a social responsibility to protect the public from exposure to such harm, when scientific investigation has found a plausible risk. These protections should be relaxed only if further scientific findings emerge that provide sound evidence that no harm will result.*

food, or for scientific experiments, including GE experiments on animals. Many individuals, seem all too eager, to become GMO¹²³ science experiments in a global trial.

114. Western Governments are adding large amounts of public debt to their financial accounts, to pay to foster the appropriate settings and climate of fear, to attain the object of ***coercing their populations to accept COVID-19 VACCINATION***. Unprecedented Acts coordinated across national boundaries, and continents are reasonable grounds to suspect a global conspiracy¹²⁴ against individual and human rights. The foregoing, despite all the published work, on the conduct of ethical medical practice and medical science research, is problematic. The highest order principles; promoting informed consent, and ethical precaution in science research, pragmatically and corruptly trashed for the gods of COVID-19.¹²⁵

NZ Government Financial Liability

115. What liability cost over NZD\$10 million does the government expect to incur, from its Public Finance Act Section [65ZD](#)¹²⁶ grant of immunity to Pfizer and more COVID-19 vaccine product makers?

116. The NZ Government has accepted Pfizer's liability for Pacific Island states, where NZ Authorities supply the Pfizer COVID-19 Vaccine:

Janssen's views on liability protection were aligned with COVAX, Gavi, CEPI and WHO, Eikli said, as well as other vaccine manufacturers and many experts at leading academic institutions specialising in global public health.

"The consensus is that governments and the global community should provide appropriate protections for all parties involved in the development, manufacturing, funding, procurement, distribution, and administration of Covid-19 vaccines who are working to help end this pandemic as rapidly as possible." [source](#)¹²⁷

123 Any arguing that "mRNA gene therapy technology is not genetic modification (GMO)", is not looking properly.

124 Where the Petitioner's evidence is a reasonable approximation of the FACTS, the COVID-19 phenomena is effectively a global hybrid war, using bioterrorism, and extreme propaganda, including, induced fear.

125 The Petitioner has made a few references to the **gods of COVID-19** as practical metaphor for the religious conviction and adherence to the "COVID-19 Narrative"; "a deadly disease that can only be cured by Vaccination", despite any evidence or science research that disposes of the false "COVID-19 religious narrative" (dogma, ideology).

126 RNZ article "Government grants vaccine suppliers indemnity against claims" published 25 January 2021: <https://www.mz.co.nz/news/national/435107/government-grants-vaccine-suppliers-indemnity-against-claims>

127 Newsroom article "NZ Government to accept liability for vaccines in Pacific" published 30 March 2021: <https://www.newsroom.co.nz/nz-labile-for-pacific-vaccines> extract; *Delivering and administering the Pfizer vaccine to remote atolls could require a full-scale Air Force operation, prompting a search for lower-risk solutions. New Zealand is expected to take on legal and financial liability for the potentially fraught roll-out of Covid-19 vaccines in Cook Islands and any other Pacific nations it assists. Many*

COVID-19 jabs seem novel and new rather than proven and true

117. Novel mRNA technology was previously employed, to create injectable products, to counter [earlier](#) forms of the coronavirus, specifically SARS1 and MERS.¹²⁸ The associated animal trials resulted in injected animals failing, and becoming distressed, when challenged with the live virus. Extract from “Vaccines for SARS-CoV-2: [Lessons](#) from Other Coronavirus Strains”, published April 2020:¹²⁹

Although inactivated viruses, DNA and viral vector-based vaccines have been tested for SARS and MERS coronavirus in clinical trials, other vaccine platforms are yet to be tested. An mRNA-based vaccine, a relatively recent technology, is being tested for COVID-19 in phase I clinical trials with other companies starting clinical trials soon as of April 11 of the year of this publication. Due to the relatively new emergence of such vaccine platforms, their performance with coronavirus diseases is still to be known.

118. By April 2020 NZ was under a novel lockdown of healthy people to flatten the curve of transmission, to ensure hospitals were not overloaded. Since then the “two weeks to flatten the curve”, has become “two years of kick the transmission can down the road” and vaccinate everyone, no matter that inconvenient facts point to the abject failure of Elimination and the vaccinate everyone policy. It is made maddeningly clear the illegitimacy of the policy when the Vaccinated need to be protected from the unvaccinated.

119. Lowest risk approach to COVID-19, is to accept infection if, and when it happens, and treat any COVID-19 symptoms, where it is apparent the patient is not clearing the viral stage, in the upper respiratory tract, and is moving toward the inflammation¹³⁰ stage because of systemic infection. Generally these patients will be those with weakened immune systems for various reasons of age, and/or comorbidities.

governments have agreed to accept liability for any problems or adverse reactions in vaccinating their own populations – but the New Zealand Government is going further. It is in talks with vaccine manufacturers, to indemnify them from all liability when New Zealand supplies their products to vulnerable Pacific nations. This country would take on all the risk.

128 “Immunization with SARS coronavirus vaccines leads to pulmonary immunopathology on challenge with the SARS virus” published 20 April 2012: <https://pubmed.ncbi.nlm.nih.gov/22536382/> extracted abstract
Conclusions: These SARS-CoV vaccines all induced antibody and protection against infection with SARS-CoV. However, challenge of mice given any of the vaccines led to occurrence of Th2-type immunopathology suggesting hypersensitivity to SARS-CoV components was induced. **Caution in proceeding to application of a SARS-CoV vaccine in humans is indicated.** (Petitioner’s emphasis).

129 “Vaccines for SARS-CoV-2: Lessons from Other Coronavirus Strains” published April 2020 and corrected November 2020: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7177048/>

130 See Dr Shankara Chetty’s Eighth Day protocol: <https://covexit.com/the-8th-day-therapy-for-covid-19/>

120. Early treatment pretty much guarantees survival, and early clearance of symptoms, which allows a patient to recover with a lifetime of solid immunity to the SARS-CoV-2 virus family, including its variants of note.

121. Natural immunity is much superior to artificially induced partial, and temporally waning immunity from COVID-19 Vaccines, noting the novelty and [experimental](#)¹³¹ nature of mRNA products, that code for the toxic S-spike protein structure, of the bioengineered coronavirus. Following is the conclusion of the authors, Stephanie Seneff, and Greg Nigh from their paper; ***Worse Than the Disease? Reviewing Some Possible Unintended Consequences of the mRNA Vaccines Against COVID-19***, published May 2021 in the "International Journal of Vaccine Theory, Practice, and Research";

Conclusion

Experimental mRNA vaccines have been heralded as having the potential for great benefits, but they also harbor the possibility of potentially tragic and even catastrophic unforeseen consequences. The mRNA vaccines against SARS-CoV-2 have been implemented with great fanfare, but there are many aspects of their widespread utilization that merit concern. We have reviewed some, but not all, of those concerns here, and we want to emphasize that these concerns are potentially serious and might not be evident for years or even transgenerationally. In order to adequately rule out the adverse potentialities described in this paper, we recommend, at a minimum, that the following research and surveillance practices be adopted:

- *A national effort to collect detailed data on adverse events associated with the mRNA vaccines with abundant funding allocation, tracked well beyond the first couple of weeks after vaccination.*
- *Repeated autoantibody testing of the vaccine-recipient population. The autoantibodies tested could be standardized and should be based upon previously documented antibodies and autoantibodies potentially elicited by the spike protein. These include autoantibodies against phospholipids, collagen, actin, thyroperoxidase (TPO), myelin basic protein, tissue transglutaminase, and perhaps others.*
- *Immunological profiling related to cytokine balance and related biological effects. Tests should include, at a minimum, IL-6, INF- α , D-dimer, fibrinogen, and C-reactive protein.*

¹³¹ "Worse Than the Disease? Reviewing Some Possible Unintended Consequences of the mRNA Vaccines Against COVID-19" International Journal of Vaccine Theory, Practice, and Research, published 10 May 2021, Stephanie Seneff, and Greg Nigh: <https://ijvtp.com/index.php/IJVTPr/article/view/23/51>

- *Studies comparing populations who were vaccinated with the mRNA vaccines and those who were not to confirm the expected decreased infection rate and milder symptoms of the vaccinated group, while at the same time comparing the rates of various autoimmune diseases and prion diseases in the same two populations.*
- *Studies to assess whether it is possible for an unvaccinated person to acquire vaccine-specific forms of the spike proteins from a vaccinated person in close proximity.*
- *In vitro studies to assess whether the mRNA nanoparticles can be taken up by sperm and converted into cDNA plasmids.*
- *Animal studies to determine whether vaccination shortly before conception can result in offspring carrying spike-protein-encoding plasmids in their tissues, possibly integrated into their genome.*
- *In vitro studies aimed to better understand the toxicity of the spike protein to the brain, heart, testes, etc. Public policy around mass vaccination has generally proceeded on the assumption that the risk/benefit ratio for the novel mRNA vaccines is a “slam dunk.”*

With the massive vaccination campaign well under way in response to the declared international emergency of COVID-19, we have rushed into vaccine experiments on a world-wide scale. At the very least, we should take advantage of the data that are available from these experiments to learn more about this new and previously untested technology. And, in the future, we urge governments to proceed with more caution in the face of new biotechnologies. Finally, as an obvious but tragically ignored suggestion, the government should also be encouraging the population to take safe and affordable steps to boost their immune systems naturally, such as getting out in the sunlight to raise vitamin D levels (Ali, 2020), and eating mainly organic whole foods rather than chemical-laden processed foods (Rico-Campà et al., 2019). Also, eating foods that are good sources of vitamin A, vitamin C and vitamin K2 should be encouraged, as deficiencies in these vitamins are linked to bad outcomes from COVID-19 (Goddek, 2020; Sarohan, 2020). (Petitioner's underline)

The live trial on the human population is an EXPERIMENT

122. One might ask; “what questions or hypotheses are being tested in the experiment?”

123. Section 23 of the NZ Medicines Act has been [amended](#)¹³² to take account of the fact that New Zealand's written [law](#)¹³³ did not allow the Provisional Approval of the Pfizer COVID-19 Comirnaty or BNT162b2 mRNA injectable product following an [application](#)¹³⁴ to the High Court by NGA KAITIAKI TUKU IHO INCORPORATED (KTI).

124. Medsafe [required](#)¹³⁵ numerous answers from Pfizer, in respect to the [COMIRNATY](#)¹³⁶ BNT162b2 mRNA injectable [product](#),¹³⁷ in their initial grant of Provisional Approval (PA), 3 February 2020, due to expire, 3 November 2021.

125. There's no prior successful coronavirus [mRNA gene therapy injectable](#)¹³⁸ available to say that one was novel, rather, than the plethora offered now in response and allegedly to cure Covid-19. None offer sterilising immunity so ought not qualify as VACCINES, rather,

132 Medicines Amendment Act 2021 done under Urgency following Justice Ellis' decision in the KTI case that the Provisional Approval under the then Medicine's Act was ultra vires:

<https://www.legislation.govt.nz/act/public/2021/0016/latest/LMS496442.html>

133 Judgement of Justice Ellis in the KTI case CIV-2021-485-181 [2021] NZHC 1107 against the Provisional Approval of the Pfizer COVID-19 Vaccine who refused to grant relief to the plaintiff whilst determining that injecting everyone in NZ over the age of 16 was not a limited number of patients:

<https://forms.justice.govt.nz/search/Documents/pdf/jdo/b1/alfresco/service/api/node/content/workspace/SpacesStore/e8d47bc3-10dd-4ef9-ad96-5162f8f12f37/e8d47bc3-10dd-4ef9-ad96-5162f8f12f37.pdf>

134 Application to the High Court by NGA KAITIAKI TUKU IHO INCORPORATED (KTI) case CIV-2021-485-181 [2021] NZHC 1107 against the Provisional Approval of the Pfizer COVID-19 Vaccine:

<https://kti.org.nz/?p=507>

135 Provisional Consent to the Distribution of a New Medicine Pursuant to section 23(1) of the Medicines Act 1981, the Minister of Health hereby provisionally consents to the sale, supply or use in New Zealand of the new medicine Comirnaty (COVID-19 mRNA vaccine) BNT162b2 [mRNA] 0.5mg/mL set out in the Schedule hereto: <https://gazette.govt.nz/notice/id/2021-go338> which states; *Provisional consent is to be granted for nine months to address an urgent clinical need. The New Zealand Sponsor must fulfil the following obligations within the timelines specified, the dates of which may be altered by mutual agreement with Medsafe which lists 58 requirements to be satisfied as the product is marketed to the public.*

136 Approval status of COVID-19 vaccines applications received by Medsafe:

<https://www.medsafe.govt.nz/COVID-19/status-of-applications.asp>

137 Medsafe Product Detail File ref: TT50-10853 Comirnaty (COVID-19 mRNA 0.5 mg/mL Pfizer-BioNTech (delivers 30 µg/0.3mL dose): <https://www.medsafe.govt.nz/regulatory/ProductDetail.asp?ID=21938> Note; Labelling exemption expires 03/11/2023.

138 "The tangled history of mRNA vaccines" 14 September 2021 Nature:

<https://www.nature.com/articles/d41586-021-02483-w> Extracted passages: *Hundreds of scientists had worked on mRNA vaccines for decades before the coronavirus pandemic brought a breakthrough. And, By the late 2000s, several big pharmaceutical companies were entering the mRNA field. In 2008, for example, both Novartis and Shire established mRNA research units — the former (led by Geall) focused on vaccines, the latter (led by Heartlein) on therapeutics. BioNTech launched that year, and other start-ups soon entered the fray, bolstered by a 2012 decision by the US Defense Advanced Research Projects Agency to start funding industry researchers to study RNA vaccines and drugs. Moderna was one of the companies that built on this work and, by 2015, it had raised more than \$1 billion on the promise of harnessing mRNA to induce cells in the body to make their own medicines — thereby fixing diseases caused by missing or defective proteins. When that plan faltered, Moderna, led by chief executive Stéphane Bancel, chose to prioritize a less ambitious target: making vaccines. That initially disappointed many investors and onlookers, because a vaccine platform seemed to be less transformative and lucrative. By the beginning of 2020, Moderna had advanced nine mRNA vaccine candidates for infectious diseases into people for testing. None was a slam-dunk success. Just one had progressed to a larger-phase trial. But when COVID-19 struck, Moderna was quick off the mark, creating a prototype vaccine within days of the virus's genome sequence becoming available online. The company then collaborated with the US National Institute of Allergy and Infectious Diseases (NIAID) to conduct mouse studies and launch human trials, all within less than ten weeks.*

as injectable mRNA gene therapeutics of questionable value and definitely which are UNSAFE, based on any reasonable or lawful definition of the word SAFE.

126. Any making claims that the COVID-19 mRNA products are safe are guilty of misrepresentation, at the least. The FACT of the knowledge held by the Government, of the harm, and ineffectiveness, of the COVID-19 Vaccines, particularly Pfizer's product, requires that the charge is criminal malfeasance, when considered in the full light of the evidence.

What does SAFE mean?

127. There is no novel meaning for SAFE.

Merriam Webster definition of [safe](#),¹³⁹ ***not involving or likely to involve danger, harm, or loss***

Black's Law Dictionary on the definition of [safe](#),¹⁴⁰ ***the amount of exposure that will cause no harm or damage after exposure***

Where any corporation, business, or marketer asserts a product is safe and it is NOT safe, the marketer and any promoting the product is liable for any harm caused.

128. Where the NZ Government asserts a therapy is safe and it is not, the harm is both enormous to the persons harmed, or killed, and to the society that is wrongly informed. Those persons who accepted the NZ Government's false assurance, that, "*the Pfizer Comirnaty Vaccine is safe*" and later realise they were lied to by the Government, face a conundrum in respect to any future advice offered by 'Authority' with respect to public policy, or matters related to health and welfare. The HARM caused by false, or fake, assertions also destroy public confidence in institutions associated with the LIE.



¹⁴¹ Capture: Medsafe CARM report #39 to 31 December displaying some of the carnage from COVID-19 Vaccination. Mandatory reporting would facilitate a more complete picture.

129. The New Zealand official Medsafe [CARM](#)¹⁴² Safety report #39, has 133 deaths on its AEFI (Adverse Event Following Immunisation) data list, as of its 31 December 2021 report. Medsafe state that this is a lower number than expected deaths¹⁴³ in the same period attempting to down play Vaccine harm. Many thousands more have been (or will) be injured directly by COVID-19 Vaccination, particularly as the COVID-19 Vaccines are rolled out to NZ's sons and daughters in the 5-11 year age bracket. The same CARM Safety report #39 has 2,015 serious adverse event reports and a total of 44,984 reported events.

130. The citizen's [database](#)¹⁴⁴ has over 300 confirmed deaths temporally associated with the COVID-19 injectables. There is a similar additional number of deceased persons whose death is suspected of being associated and/or caused by Covid vaccination. The total deaths caused by, or associated with COVID-19 Vaccination, might be higher than 700 persons, and then there's the unknown and unknowable.

131. Mandatory reporting of adverse events ought to have been adopted, by a Government keen on knowing the truth of the effects, of their COVID-19 Vaccination and medical intervention policy.

132. Within NZ there are several thousand damaged or harmed; injured, weakened, distressed, not to mention the familial relationships of those deceased, or impacted by the distress of their previously healthy family and friends.

¹⁴¹ Screen capture from Medsafe CARM report #39 to 31 December 2021:

<https://www.medsafe.govt.nz/COVID-19/safety-report-39.asp>

¹⁴² Medsafe CARM reports: <https://www.medsafe.govt.nz/COVID-19/vaccine-report-overview.asp> see report #39 to 31 December 2021: <https://www.medsafe.govt.nz/COVID-19/safety-report-39.asp>

¹⁴³ According to Medsafe, *data for expected death rates was obtained from the AESI background rate (SAFE) study provided by the University of Auckland. The age-specific background rates used are the average from 2008-2019.* Given the Citizen's database is tracking nearly 3X higher for their 'confirmed list' of 300+ and they also have a list that has ~700 suspected (assume that includes the 300+ confirmed post Vaccine deaths) which would then suggest all cause mortality is up by the factor of 5X divided by 2, (700 divided by 137) (137 is Medsafe Carm mortality number 31-12-2021) = 5.109489051094891 (I had a calculator) Let's say 5.1 or 5X however, that needs to be divided by our reference rate from the relationship of CARM's register of AEFI/AESI deaths post Vax to the 'expected death rate' of ½ of 500% divided in half is 250% up or increase over expected mortality for the period of Vaccination, basically a year from February 2021.

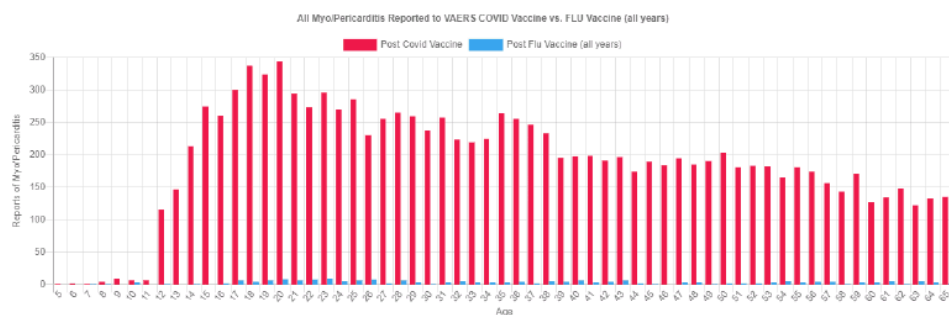
¹⁴⁴ Citizens database of post COVID-19 Vaccine deaths (anonymised) to end of 2021 lists 317 deaths: https://docs.google.com/spreadsheets/d/1EXQRRGGzcxqFL6txrXgGC_Xp7Gb0LbCE3LLyszFBAs/edit#gid=1713619946

133. The number of people [harmed](#)¹⁴⁵ by the COVID-19 Vaccines will grow, as the rollout impacts more people in younger age groups and those who accept booster shots. **The Petitioner asserts that all know of some person(s) who are harmed by COVID-19 Vaccination.**

<https://openvaers.com/covid-data/myo-pericarditis>

VAERS COVID Vaccine Myo/Pericarditis Reports

Through January 14, 2022



¹⁴⁶ Capture of VAERS myocarditis and pericarditis reports comparing the carnage associated with COVID-19 vaccines and the still risky but relatively benign influenza vaccine.

134. It is unprecedented and novel for a medicine which is directly implicated in so much harm, not to be withdrawn from the market. International [data](#)¹⁴⁷ confirms the [pattern](#)¹⁴⁸ of high levels of post COVID-19 Vaccination adverse event injury, and mortality.

¹⁴⁵ We wouldn't Dream, of inflicting this on cattle" By Colin Maxwell (retired Angus cattle farmer) 27 January 2022 on Gary Moller's Health and Nutrition webpage: <https://www.garymoller.com/post/we-wouldn-t-dream-of-inflicting-this-on-cattle>

¹⁴⁶ Screen capture Open VAERS website which uses VAERS data to make AEFI/AESI comprehensible for the public; "VAERS COVID Vaccine Myocarditis/Pericarditis Reports" Through January 14, 2022 (COVID-19 vaccine compared to influenza vaccine reports): <https://openvaers.com/covid-data/myo-pericarditis>

¹⁴⁷ Open VAERS website: <https://openvaers.com/covid-data/myo-pericarditis>

¹⁴⁸ WHO Vigiaccess 3,082,992 reports of ADRS associated with "Covid-19 vaccine:" <http://vigiaccess.org/> VigiAccess is a web-based tool for searching VigiBase (see below) to retrieve summarised statistical representations of the data available on potential side effects that have been reported to the World Health Organization Programme for International Drug Monitoring (WHO PIDM). VigiAccess was designed to deliver greater transparency to the medical safety system by providing a basic overview of the potential side effects reported in association with any particular medicinal product. Please note, in VigiAccess, potential side effects are listed under the heading "Adverse drug reactions (ADRs)", but this listing includes suspected adverse drug reactions (in relation to medicines) and adverse events following immunization (in relation to vaccines).

How many dead is too many killed – is there no upper boundary?

135. Pfizer's data on its trials and post marketing reports of adverse events, confirm the knowledge expounded within this paper, of the extent of the harm and carnage. The NZ Government and Medsafe knew (or ought to have known), as they required that Pfizer to provide copies of all reports of the effects, including postmarketing AEFI and AESI adverse event reports as part of the NZ consent process, leading to the 3 February 2021 Provisional Approval of Pfizer's COVID-19 Vaccine product. Surely Medsafe read the reports they gain from Pfizer, to know of the thousands dead and tens of thousands injured as of February 2021 (the report was published by Pfizer end of April 2021).

Pfizer COVID-19 mRNA Vaccine is not SAFE

136. NZ Medsafe Gazetted Provisional Approval (PA) for Pfizer COMIRNATY BNT COVID-19 mRNA injectable, provided for Pfizer to supply many [reports](#)¹⁴⁹ and data to Medsafe including clauses 54-58:

*54. Provide any reports on efficacy including asymptomatic infection in the vaccinated group, vaccine failure, immunogenicity, efficacy in population subgroups and results from **post-marketing studies, within five working days** of these being produced. (Petitioner's emphasis)*

55. Provide the final Clinical Study Reports for Study C4591001 and Study BNT162-01 within five working days of these being produced.

56. Provide Periodic Safety Update Reports according to the same schedule as required by the EMA.

*57. **Provide monthly safety reports, as well as all safety reviews they conduct or become aware of.*** (Petitioner's emphasis)

58. Perform the required pharmacovigilance activities and interventions detailed in the agreed RMP and any agreed updates to the RMP. An RMP should be submitted at the request of Medsafe or whenever the risk management system is modified, especially as the result of new information being received that may lead to a

149 NZ Gazette; Provisional Consent to the Distribution of a New Medicine "Pfizer Comirnaty (COVID-19 mRNA vaccine) Active Ingredient: BNT162b2 [mRNA] 0.5mg/mL" 3 February 2021: <https://gazette.govt.nz/notice/id/2021-go338>

significant change to the benefit/risk profile or as the result of an important milestone being reached.

The Petition assumes that Pfizer honoured the contract with the NZ Government and the PA, and has since supplied the documentation, reports and clarifications sought in the PA to Medsafe (NZ Government).

137. Where Pfizer did as contracted, then Medsafe and the Government, would have Pfizer's **5.3.6 Cumulative Analysis of Post-authorization Adverse Event¹⁵⁰ Reports of PF-07302048 (BNT162B2) received through 28-FEB-2021**, soon after publication in April 2021. The Government (Medsafe) would also have more information; reports and data resulting from their contract with Pfizer, that we in the public are yet to access.

Recommendation for fact check:

The Petitions Committee might ask Medsafe, and/or the Ministry of Health, for a report on Pfizer's data supplied to the Government to satisfy the Committee that the foregoing is an accurate reflection of the contractual obligations, explicit in the Provisional Approval of the COMIRNATY injectable. The Petitioner considers such a request for disclosure a necessity, where the Committee is sceptical of the FACTUAL evidence this paper provides, for the Committee's knowledge of the matter.

138. Pfizer's postmarketing survey of AEFI,¹⁵¹ following injection from 01 December 2020 to 28 February 2021, published 30 April, and released through US FOIA (United States Freedom of Information Act), lists a total of 42,086 case reports; 25,379 medically confirmed and 16,707 non-medically confirmed, containing 158,893 events. Additionally 1,223 resulted in death, 520 recovered with sequelae,¹⁵² 11,361 were not recovered at the time of report and 9,400 were of unknown status.

150 Pfizer's "5.3.6 Cumulative Analysis of Post-authorization Adverse Event Reports of PF-07302048 (BNT162B2) received through 28-FEB-2021" published April 2021: <https://phmpt.org/wp-content/uploads/2021/11/5.3.6-postmarketing-experience.pdf> Where Pfizer complied with the NZ Provisional Approval the NZ Government would have this report of over 1220 post vaccine deaths and many tens of thousands injured, in its possession from May 2021.

151 Pfizer's "5.3.6 Cumulative Analysis of Post-authorization Adverse Event Reports of PF-07302048 (BNT162B2) received through 28-FEB-2021" published April 2021: <https://phmpt.org/wp-content/uploads/2021/11/5.3.6-postmarketing-experience.pdf>

152 Definition of sequela (plural sequelae): <https://www.merriam-webster.com/dictionary/sequela> Definition of sequela 1: an after effect of a disease, condition, or injury, and; 2: a secondary result

139. Public Health and Medical Professionals for Transparency (PHMPT¹⁵³) is a nonprofit organisation, made up of public health professionals, medical professionals, scientists and journalists, and exists solely to obtain and disseminate the data relied upon by the FDA, to license COVID-19 vaccines. The organization takes no position on the data, other than that it should be made publicly available, to allow independent experts conduct their own review, and analyses.

140. PHMPT originally gained some access to FDA documents¹⁵⁴ including the above linked post marketing survey, however, the FDA were only willing to release documents at a snail's pace. Subsequent litigation¹⁵⁵ recently attained¹⁵⁶ a Court decision¹⁵⁷ for an expedited production schedule rate of 55,000 pages per month from March 2022 which will result in the full 450,000 pages of documents released by August 2022.

141. Latest with respect to the US FDA releasing the Pfizer documents, is an appeal¹⁵⁸ by the FDA, assisted by an application made by Pfizer, to slow down document production (the public's right to know, is limited by bureaucratic obfuscation, and obstruction).

153 Public Health and Medical Professionals for Transparency (PHMPT): <https://phmpt.org/> About; *This nonprofit, made up of public health professionals, medical professionals, scientists, and journalists exists solely to obtain and disseminate the data relied upon by the FDA to license COVID-19 vaccines. The organization takes no position on the data other than that it should be made publicly available to allow independent experts to conduct their own review and analyses. Any data received will be made public on this website.*

154 PHMPT website hosts 24 Pfizer documents related to their COVID-19 injectables including the Post Marketing report referred to in endnotes 117 and 118: <https://phmpt.org/pfizers-documents/>

155 PHMPT Court Documents developed in respect to PHMPT's filings (17 documents) to gain FOIA access to FDA Pfizer documents: <https://phmpt.org/court-documents/>

156 "Injecting Freedom: Instead of FDA's Requested 500 Pages Per Month, Court Orders FDA to Produce Pfizer Covid-19 Data at Rate of 55,000 Pages Per Month!" Aron Siri, published 7 January 2022: <https://aaronsiri.substack.com/p/instead-of-fdas-requested-500-pages>

157 Decision for expedited production of FOIA documents PHMPT vs FDA Case 4:21-cv-01058-P which will see production complete by August 2022: https://www.sirillp.com/wp-content/uploads/2022/01/ORDER_2022_01_06-9e24e298ae561d16d68a3950ab57077b.pdf

158 "FDA Asks the Court to Delay First 55,000 Page Production Until May and Pfizer Moves to Intervene in the Lawsuit", by Aaron Siri published 27 January 2022: <https://aaronsiri.substack.com/p/fda-asks-the-court-to-delay-first-ftnref1> extracted opening; *As explained in prior posts, in a lawsuit seeking all of the documents the FDA relied upon to license Pfizer's COVID-19 vaccine, a federal judge shot down the FDA's requested rate of 500 pages per month and instead ordered the FDA to produce at the rate of 55,000 pages per month starting on March 1. Since the government has trillions of dollars of our money, it is putting it to good use by fighting to assure that the public has the least amount of transparency possible. To that end, it has now asked the Court to make the public wait until May for it to start producing 55,000 pages per month and, even then, claims it may not be able to meet this rate. The FDA's excuse? As explained in the brief opposing the FDA's request, the FDA's defense effectively amounts to claiming that the 11 document reviewers it has already assigned and the 17 additional reviewers being onboarded are only capable of reading at the speed of preschoolers. Meanwhile... As the FDA tries to obtain months of delay, guess who just showed up in the lawsuit? Yep, Pfizer. And it is represented by a global chair and team from a law firm with thousands of lawyers. Pfizer's legal bill will likely be multiple times what it would cost the FDA to simply hire a private document review company to review, redact, and produce the documents at issue. Within weeks, if not days. Pfizer is coming in as a third party. But Pfizer assures the Court it is here to help expedite production of the documents.*

142. Subsequent to the Pfizer Post Marketing report, COVID-19 Vaccinations have been delivered into the bodies of billions of human beings throughout 2021. Extrapolating from Pfizer's post marketing report, and voluntary reporting of AEFI in multiple jurisdictions, it is knowable, that the human carnage, dead and injured persons, is enormous, and growing.

143. Data researchers have collated the [batch](#)¹⁵⁹ numbers, of the various Emergency Use Approval (EUA) COVID-19 Vaccines, and cross matched with the number of AEFI deaths recorded against batch number, using VAERS publicly available data. The variation in AEFI according to batch numbers (where it is intentional), indicate a purposeful experiment, whose object might be to optimise the dose (whatever the specifics of variation), to suit particular demographics for particular outcomes. Variation in COVID-19 Vaccine contents is a perverse experiment, which the Petitioner presumes is NOT aimed at optimising human health and wellbeing. From the HowBad website that collated the batch number data;

According to data reported in VAERS, reproduced here, adverse events triggered by Pfizer batches have varied widely.

5% of the batches appear to have produced 90% of the adverse reactions

Some Pfizer batches are associated with 30 x the number of deaths and disabilities compared to other batches

144. The variation in COVID-19 Vaccine contents and the resultant AEFI reports according to batch numbers, whether the result of intentional acts by Pfizer (and more COVID-19 Vaccine producers), or from within its chain of command, point to the FACT that there exists evidence of either Criminal MALFEASANCE, or Criminal Negligence. No ordinary or benign answer exists, to dispose of the specific variation in COVID-19 Vaccine product batch number lethality scores, in regard to AEFI/AESI is available.

145. The Petitioner, placed the Australian [TGA batch](#)¹⁶⁰ numbers of latest and earliest (by date of approval) Pfizer COVID-19 Vaccine product, into the How Bad is your batch

¹⁵⁹ How Bad is my Batch: Pfizer - Outside of the USA:

<https://www.howbadismybatch.com/pfizerforeigndeaths.html>

¹⁶⁰ Therapeutic Goods Administration (TGA) "Batch release assessment of COVID-19 vaccines" updated 5 January 2022: <https://www.tga.gov.au/batch-release-assessment-covid-19-vaccines> TGA ensures there is an independent quality assessment of every batch of vaccine supplied in Australia.

[calucator](#),¹⁶¹ and found the latest, to be less lethal, and injurious, than many of the earlier batches most of those I checked had close to 50 mortalities per batch, see first two (2):

#EP2163 AEFI 1219, deaths 68, Disabilities 73, life threatening illnesses 65;

#EP9605 AEFI 1547, deaths 55, disabilities 47, life threatening illnesses 60;

146. The 28 January 2022 NZ Parliament's Health select committee hearing, saw Lawyer Sue Grey, Co-leader of Outdoors and Freedom Party, and Dr Matt Shelton, report that there is laboratory confirmed [evidence](#)¹⁶² of Nanotechnology (other than the 'approved contents' of mRNA and lipid-nanoparticles etc), found in Pfizer COVID-19 COMIRNATY Vaccine vials, sourced from New Zealand. Where Pfizer is adjusting, and altering the contents of its COVID-19 Vaccine, and does not disclose the contents, nor the associated potential risks, or likely resultant harms, it breaches public and commercial trust.

147. Pfizer's post marketing report of April 2021, alphabetically lists [nine](#)¹⁶³ (9) pages (pages 30-38) of closely spaced diseases, and syndromes expected, or associated with its BNT162b2 mRNA injectable product.

148. For reasons of legal liability and indemnity Pfizer and more vaccine producers, are required to list all known and potential adverse effects (notwithstanding the information about nanotech secret ingredients in paragraph **146**). The many potential adverse effects must be known by the NZ Government and its regulators, including Medsafe. This is publicly known through comprehending Pfizer's contractual obligations 1-58, testament in the Gazetted Provisional Approval on 3 February 2021 and subsequently of Pfizer's COMIRNATY product.

149. NZ's Government gave no indication to the public of likely harm (AEFI/AESI injury and death), when promoting and forcing COVID-19 Vaccination. Rather the NZ Government promoted the Pfizer COMIRNATY product as being SAFE and EFFECTIVE. Lawful informed Consent to COVID-19 Vaccination within the COVID-19 Experiment, as outlined in the Petitioner's thesis, is impossible.

¹⁶¹ How Bad is my Batch? Pfizer - Outside of the USA:

<https://www.howbadismybatch.com/pfizerforeigndeaths.html> Extracted explanation; *According to data reported in VAERS, reproduced here, adverse events triggered by Pfizer batches have varied widely. 70% of the batches are associated with only 1 or 2 deaths per batch, but a small % of the batches appear to be more toxic - being associated with 10 x, 20 x, 30 x, 40 x, 50 x, 100 x or even 200 x the number of deaths compared to the less harmful 70% of the batches. Therefore, members of the public should be wary of the batch they are receiving, and doctors and nurses should ALWAYS check the batch number before administering it, to see if it is associated with an excessive number of deaths.*

¹⁶² "Nanotech found in Pfizer jab by New Zealand lab", Sue Grey Co-leader of Outdoors and Freedom Party and Dr Matt Shelton report findings to Parliament's Health Select Committee:

<https://odysee.com/@spearhead4truth:e/Nanotech-discovery-280122:9>

¹⁶³ PHMPT FDA FOIA release of Pfizer's Post Marketing report to 28 February 2021 referenced in endnotes 117 and 118: <https://phmpt.org/wp-content/uploads/2021/11/5.3.6-postmarketing-experience.pdf>

150. Where the FDA knew of the extent of the adverse events resulting from Vaccination, it is impossible to consider the New Zealand Government, was ignorant of the harm caused by Pfizer's COVID-19 Vaccine. Nevertheless NZ proceeded to encourage, nudge, cajole, propagandise, scare, terrorise, blackmail and mandate, through the use of coercive force, the population to be vaccinated and [take one](#) for the team.¹⁶⁴

151. An individual's ability to full be informed and provide full and free consent is denied with the withholding of critical data. Whatever the NZ Government [knows](#)¹⁶⁵ about the Pfizer COVID-19 injectable and its contractual arrangements with the supplier it intends to keep them [secret](#),¹⁶⁶ as it is against the Government's definition of public interest, for masses of people to know. Whereas real public interest and truth, requires full disclosure given the controversy and politicisation that affects everything Covid. It takes considerable work to discover the FACTS of the Covid matter.

164 MSM republication of Newshub article 9 September 2021 "It's not the Aotearoa way": Ardern's thinly veiled warning to anti-vaxxers"<https://www.msn.com/en-nz/news/national/it-s-not-the-aotearoa-way-ardern-s-thinly-veiled-warning-to-anti-vaxxers/ar-AAOIVQ7> Extract of the PM's quotes; *Speaking at the press conference on Thursday afternoon, Ardern called on Kiwis to play their part - with a barely concealed jab at those who have so far refused to get vaccinated. "The progress in recent weeks has been significant... 90 percent is within [our] sights. Now we need to work together to see all of our communities get up to those rates and beyond," she said. "It's not the Aotearoa way to leave anyone behind and it just doesn't feel right. So here is our chance to lead the world again and that comes down to each and every one of us. We have the supply of vaccines we need, we have the workforce ready to do the job - so have that conversation with your whanau or friends. Help someone make a booking or give them a lift to a vaccination centre. Each action, large or small, gets us a step closer to the opportunities and freedoms we all want."* Before taking questions, Ardern finished her opening remarks with a direct plea: "In the meantime, across all the debate... There remains one simple message: get vaccinated. It's the reason we should all feel hopeful." That's it; **"Get Vaccinated" even if its risky and useless.**

165 "PFIZERLEAK: EXPOSING NEW ZEALAND'S MANUFACTURING OF MANDATED COMPLIANCE" Nadine Connock 19 December 2021: <https://dailytelegraph.co.nz/opinion/pfizerleak-exposing-new-zealands-manufacturing-of-mandated-compliance/> Extracted opening; *Nadine Connock investigates global regulatory capture and controlled bureaucratic incompetence. In the throes of an emerging global pandemic, I vividly remember experiencing my first red flag. Governments are paying people to stay at home? In a move that saw Workers Unions and Human Rights groups heads spin after decades of lobbying and campaigning for improvements in fairer and equitable working conditions, the majority of the population did not raise an eyebrow. Our Governments were doing the 'right' thing. Two years on, and society's global fabric has eroded into all manner of battlefields over vaccine equity, medical apartheid, and the politicization of science. The buzz word 'unprecedented' became standard sedative rhetoric. Yet what was not mainstream news was the unprecedented pressure to push through vaccine trials to achieve authorisation; financial incentives in untested technology; and censorship of scientific research. Warp speed parliamentary legislation changes were rushed through without public mandate. All in order to accommodate preferential bilateral trade agreements due to vaccine negotiations and acquisition. The New Zealand Labour Government Vaccine Taskforce citing "timeliness" (not due diligence) as utmost priority. But one aspect remains unchanged: BigPharmaTech is pocketing big bucks through fraudulent manufacturing and supply contracts secured under regulatory capture and indemnification overreach.*

166 OIA request by T. Baker on FYI.org webpage; "Pfizer vaccine provisional consent conditions information:" <https://fyi.org.nz/request/17184-pfizer-vaccine-provisional-consent-conditions-information> Information was refused by MoH based on commercially sensitivity or information not held which means that Pfizer hasn't upheld and met the conditions required under Provisional Approval of 3 February 2021.

152. The definition for what constitutes a [vaccine](#)¹⁶⁷ has recently been [altered](#),¹⁶⁸ to allow for gene therapy mRNA injectables to be defined as vaccines. The COVID-19 mRNA Vaccinations code for a protein, that is a computer simulation of a S spike protein from the SARS-CoV-2 virus Alpha variant. The Salk institute found the S spike protein, to be toxic to human beings and that the virus is associated with [vascular](#)¹⁶⁹ disease. Extract from Salk publication April 2021,

In the new study, the researchers created a “pseudovirus” that was surrounded by SARS-CoV-2 classic crown of spike proteins, but did not contain any actual virus. Exposure to this pseudovirus resulted in damage to the lungs and arteries of an animal model—proving that the spike protein alone was enough to cause disease. Tissue samples showed inflammation in endothelial cells lining the pulmonary artery walls.

The team then replicated this process in the lab, exposing healthy endothelial cells (which line arteries) to the spike protein. They showed that the spike protein damaged the cells by binding ACE2. This binding disrupted ACE2’s molecular signaling to mitochondria (organelles that generate energy for cells), causing the mitochondria to become damaged and fragmented.

Previous studies have shown a similar effect when cells were exposed to the SARS-CoV-2 virus, but this is the first study to show that the damage occurs when cells are exposed to the spike protein on its own.

“If you remove the replicating capabilities of the virus, it still has a major damaging effect on the vascular cells, simply by virtue of its ability to bind to this ACE2 receptor, the S protein receptor, now famous thanks to COVID,” Manor explains. “Further studies with mutant spike proteins will also provide new insight towards the infectivity and severity of mutant SARS CoV-2 viruses.”

153. Given the SARS-CoV-2 S spike protein is toxic to humans, its introduction through mRNA injection, enables mRNA to infect cells and code for the production of billions, if not trillions of copies of the computer simulated S-spike protein. S-spikes disperse through the

167 Webarchive of Merriam Webster dictionary entry for 'vaccine' from 2019:

<https://web.archive.org/web/20190123105554/https://www.merriam-webster.com/dictionary/vaccine>
Definition of vaccine: a preparation of killed microorganisms, living attenuated organisms, or living fully virulent organisms that is administered to produce or artificially increase immunity to a particular disease

168 Contemporary definition of a vaccine includes reference to mRNA injectables: <https://www.merriam-webster.com/dictionary/vaccine> now includes the following definition; b: a preparation of genetic material (such as a strand of synthesized messenger RNA) that is used by the cells of the body to produce an antigenic substance (such as a fragment of virus spike protein)

169 “The novel coronavirus’ spike protein plays additional key role in illness” published 30 April 2021: <https://www.salk.edu/news-release/the-novel-coronavirus-spike-protein-plays-additional-key-role-in-illness/> Salk researchers and collaborators show how the protein damages cells, confirming COVID-19 as a primarily vascular disease

human body and its vascular system under the guise of a therapeutic medicine called a Vaccine. It is an extreme and egregious experiment, when rolled out to all New Zealand inhabitants and the world of people, without their full, free and informed consent. The S-spike is the most toxic bit of the viral entity. Why didn't the mRNA innovators consider a more benign protein from the SARS-CoV-2 virus? Dr Robert Malone on the matter or [risk](#),¹⁷⁰ and benefit, of the COVID-19 viral vector and mRNA vaccine candidates.

154. The description of the Pfizer mRNA injectable COVID-19 Vaccine product, and its potential deleterious effects, is expounded in the interview with Dr Daniel [Nagase](#),¹⁷¹ a senior practising clinician, who makes plain some of the vectors of action which might explain some of the injury, and mortality, temporally associated with the COVID-19 Vaccines and particularly the Pfizer mRNA product. Extracted Dr. Nagase's observations from the interview;

Dr. Daniel Nagase graduated from Dalhousie Medical School in 2004, is a registered member of the College of Physicians and Surgeons in Alberta where he has been a doctor for over 15 years, an emergency doctor for 10 years and has treated patients in rural under-serviced communities throughout Alberta since 2015. Dr. Nagase was fired after treating three Covid patients with Ivermectin at the Rimbey Hospital and Care Centre. Listen to him speak on the dangers of the injection from a microbiology perspective.

Pfizer's COVID vaccine trial results; are these statistics "acceptable"?

Absolutely not. They wouldn't be acceptable for any medication brought to market, this magnitude of side effects, 31% either died, had permanent disability or were not recovered. It's insane that at the time of the report to government authorities, April 30th, 2021 that this drug, this injection wasn't pulled off the market immediately.

Explaining some devastating known side effects

Sequela is some type of a problem that lingers even though you recovered. Let's say you had an extremely high fever with seizures and the seizures never actually went away, you keep getting occasional seizures every now and then, or you have paralysis of an arm or a leg after the seizure and that just doesn't go away.

¹⁷⁰ Dr Robert Malone speaks at Defeat the Mandates - Washington, D.C. - 1/23/2022 full speech 15 minz "If there is risk there must be free choice," and "To deny this is to deny human dignity:" <https://www.youtube.com/watch?v=TY2frp7S4g0> Dr. Malone's speech is an indictment against the COVID-19 Response narrative, consider it evidence as he speaks as a scientist in the area of his speciality – expert testimony.

¹⁷¹ Breaking News: Pfizer's Own Stats: 1200+/40,000 Trial Participants Dead | Interview with Dr. Nagase December 13, 2021: <https://strongandfreecanada.org/vlog/breaking-news-pfizers-own-stats-1200-40000-trial-participants-dead-interview-with-dr-nagase/>

Reverse transcriptase is where mRNA is turned into DNA, and depending on where that segment of DNA accidentally interrupts and integrates itself into the cells DNA, you can either be causing cancer, you can be causing mutations, or you might not cause anything at all. It's completely random. The reverse transcriptase itself can lead this mRNA injection into causing new mutations in the DNA.

Effects on pregnant women

Out of 274 pregnancy cases where pregnant women received this injection, there were 75 serious reported clinical events. 75 over 274. That's a 27% serious clinical event instance. Any pregnant woman who received this injection after April 30th, 2021 should be suing their obstetrician for malpractice. Absolutely unheard of.

Effects on our children

There were 34 instances where children under the age of 12 were given this injection between December 1st and February 28th. Of those 34 children, 24 had serious side effects. Of those 24 kids who had a serious case after getting this injection 16 were resolved or resolving, 13 had not resolved and five were unknown.

Risks of genetic damage to children

We're not even talking about the genetic damage. This is just the damage that they discovered in the first three months between December 1st and February 28th, a pregnancy is nine full months. We don't know how many of the other cases that were non-serious in the first two months might turn into serious events, miscarriages stillbirths, birth defects, deformities, developmental delay, which is where a child doesn't develop the ability to walk, talk or think at a normal rate. In previous years, it was called mental retardation. We have no idea what the long-term effects are.

Are smaller doses for children safe and effective?

No, as long as there's enough of a dose, if it's a 1/3, one quarter, one tenth a dose, it only changes the amount of time it takes to produce copies of itself. It'll just take a little bit longer at one tenth of the dose than at the full adult dose. There is no safe dose for this injection.

155. There is no way that any person, can credibly assert, that the NZ Pfizer mRNA COVID-19 Vaccine being mandated, and coerced onto the New Zealand citizens, is either a proven SAFE, or EFFECTIVE Vaccine or therapeutic product. Trials are ongoing

according to Pfizer's Comirnaty data sheets, and provisional approval [documents](#)¹⁷² provided to the NZ Government/Medsafe.

156. Further the Government's key Covid messengers, including the Prime Minister Jacinda Ardern, repeatedly offered the NZ citizens the platitude, or false promise, that no one would be [forced](#)¹⁷³ to take the COVID-19 vaccination. The first such utterance was mid 2020, and more recently, [August](#)¹⁷⁴ 2021, in an OIA answer from MoH Officer Clare Perry, Deputy Director-General Health System Improvement and Innovation.

Pfizer COVID-19 Vaccine is not effective

157. The data indicating the [declining](#) effectiveness of the various EUA approved COVID-19 injectables was available to health authorities and governments from early in the rollout. "Diary of a Scientist in New Zealand" by Dr. Guy Hatchard published, January 2, 2022 has this to say about when the world knew the COVID-19 Vaccines were ineffective (extract from Dr Hatchard's Diary – note I have hyperlinked the references in the extract):

Sometime early in 2021, there must have been a NZ government decision to accept at face value data from Pfizer that the vaccine was 95% effective and completely safe.

On this basis they launched a public advertising campaign emphasising its complete safety and effectiveness. Yet even in January before our vaccine rollout, studies were surfacing indicating that the effectiveness of the Covid vaccines [dropped](#) off rapidly.

172 NZ Gazette 3 February 2021 Pfizer Comirnaty (COVID-19 mRNA vaccine):

<https://medsafe.govt.nz/COVID-19/Comirnaty-Gazette.pdf> Provisional Consent to the Distribution of a New Medicine Pursuant to section 23(1) of the Medicines Act 1981, the Minister of Health hereby provisionally consents to the sale, supply or use in New Zealand of the new medicine set out in the Schedule hereto: Comirnaty (COVID-19 mRNA vaccine) Active Ingredient: BNT162b2 [mRNA] 0.5mg/mL Pfizer New Zealand Limited

173 Newshub article; "Coronavirus: Jacinda Ardern confident enough Kiwis will get COVID-19 vaccine for herd immunity without being forced to" published 22 September 2020:

<https://www.newshub.co.nz/home/politics/2020/09/coronavirus-jacinda-ardern-confident-enough-kiwis-will-get-covid-19-vaccine-for-herd-immunity-without-being-forced-to.html> On Tuesday Prime Minister Jacinda Ardern went a step further, saying not only will there be no forced vaccinations, but those who choose to opt-out won't face any penalties at all. "No, and we haven't for any vaccination in New Zealand applied penalties in that way," Ardern told The AM Show, after being asked if there might be tax penalties or other sanctions for refusing a COVID-19 vaccine. "But I would say for anyone who doesn't take up an effective and tested and safe vaccine when it's available, that will come at a risk to them."

174 5 August 2021 response to an OIA request asking seventeen (17) questions of the MoH in relation to the COVID-19 vaccine program in NZ: <https://www.health.govt.nz/system/files/documents/information-release/h202109490.pdf> Answer by Deputy Director of Health Clare Perry to question #17 states; **"Additionally, it is not mandatory to be vaccinated against COVID-19"**

This was quantified as about 39% after six months. By the end of May Israeli scientists had found a risk of some degree of myocarditis in as many as 1 in 2,500 recipients, especially after the second Pfizer dose. These warning signs did not appear to have any impact on government policy or messaging.

As the year went on key studies carried a clearer message. A study in the European Journal of Epidemiology published on 30th September found incidence of COVID-19 is unrelated to levels of vaccination across 68 countries and 2947 counties in the United States.

On October 13th a study in Viruses reported that the Covid spike protein inhibits cellular DNA repair in vitro.

On October 25th, a study published in the Lancet of 1.6 million individuals in Sweden found that effectiveness of mRNA vaccines becomes undetectable after 7 months.

Read the whole [article](#) and more on Dr Guy Hatchard's [website](#).

158. It is claimed that, Pfizer's COVID-19 Vaccine is safe and showed 95% efficacy 7 days after the 2nd dose. But that 95% was actually Relative Risk Reduction.¹⁷⁵ Absolute Risk Reduction was only 0.84%. That requires a lot of people to be vaccinated to save one individual from being infected and an astronomical number to save one life, whilst the more injected with the toxic S spike producing mRNA raises the number at risk from AEFI/AESI harm, injury and death.

159. The requirement for COVID-19 Vaccine boosters, signifies the lack of sterilising immunity induced in those 'vaccinated against the COVID-19 disease. The credulous members of the public¹⁷⁶ who believe the official COVID-19 narrative, also accept frequent

¹⁷⁵ **Smart Health Choices: Making Sense of Health Advice. Published 2008**, Chapter 18 "Relative risk, relative and absolute risk reduction, number needed to treat and confidence intervals:" <https://www.ncbi.nlm.nih.gov/books/NBK63647/> *Relative and absolute risks: How do you interpret the results of a randomised controlled trial? A common measure of a treatment is to look at the frequency of bad outcomes of a disease in the group being treated compared with those who were not treated. For instance, supposing that a well-designed randomised controlled trial in children with a particular disease found that 20 per cent of the control group developed bad outcomes, compared with only 12 per cent of those receiving treatment. Should you agree to give this treatment to your child? Without knowing more about the adverse effects of the therapy, it appears to reduce some of the bad outcomes of the disease. But is its effect meaningful? This is where you need to consider the risk of treatment versus no treatment. In healthcare, risk refers to the probability of a bad outcome in people with the disease. Absolute risk reduction (ARR) – also called risk difference (RD) – is the most useful way of presenting research results to help your decision-making.*

¹⁷⁶ **"Mattias Desmet on Our Grave Situation"** interviewed by Chris Martenson on his Peak Prosperity podcast show, published 3 December 2021: <https://www.youtube.com/watch?v=CRo-ieBEw-8> The video ought to be watched for proper comprehension of Mass Formation in populations leading to totalitarian states, and the description needs to be read and placed on the public record for posterity as NZ and the World move along the novel pathway – description from the youtube link; *Professor Mattias Desmet talks about his work that connects past historical episodes of what is called "Mass Formation" (aka Mass*

adjustments to COVID-19 policy, as per necessity. My perception of [necessity](#)¹⁷⁷ is what is necessary to maintain the credibility, replication and mass acceptance of the official Covid narrative, which is;

1. COVID-19 is caused by a novel pathogenic coronavirus SARS-CoV-2.
2. COVID-19 pathogen is a zoonotic emergence (natural, rather than biolab creation of a synthetic chimera).
3. COVID-19 is both highly infectious and deadly.
4. COVID-19 positive diagnosis is measured by PCR test.
5. COVID-19 in early 2020 had no known cure amongst available medicines and therapeutics in the global medicine cabinet.
6. COVID-19 illness would over run hospital ICU capacity causing a break down of the Health system.
7. COVID-19 is best kept out of NZ for as long as possible no matter the cost to other policy considerations; public health and mental wellbeing, economy, social spirit, trampling of rights and democratic practice and which required NZ to seal the borders and adopt an elimination strategy.
8. COVID-19 in early 2020 could only be mediated through lockdown, social distancing and other non-pharmaceutical interventions.
9. COVID-19 would cause in NZ an estimated 30,000 (or more, from variance in the many models) thousands to die and countless thousands to become ill.

*Psychosis) and current events. The risks are as grave as they come. Unless a few brave and courageous people are willing to stand up and say "I don't agree!" history suggests that we will end up with a fully totalitarian outcome. That is a dark path. It inevitably leads to mass casualties and atrocities. Eventually all totalitarian systems end in their own destruction. My position (Chris Martenson) is "it doesn't have to be this way." We can do better. Let's avoid a future of atrocities and the complete destruction of our way of life. Unfortunately, those caught up in the Mass Formation event cannot see the larger or wider implications of their actions. They are very much like a hypnotized person with their field of view narrowed down to a singular threat or risk they have been told is the one-and-only threat they must conquer. So all of their attention goes there. It focusses down. Nothing else matters. Eventually they transfer their anger and rage at that enemy – which is Covid today – upon a more relatable a nearby object. Perhaps their neighbor. Perhaps the unvaccinated. Perhaps immigrants who are stealing their jobs, or those who aren't taking Climate Change seriously enough. With that transference, the path has been laid to re-trod some of the most awful and inhumane periods of history. We're there again and our own integrity demands that we do what we can to avoid going any further down that path. In this episode **Mattias tells us what can be done. We must never resort to violence. We must be courageous and speak up. We must hold everyone with compassion. But most of all, we must speak up.***

¹⁷⁷ Definition of necessity: <https://www.merriam-webster.com/dictionary/necessity> Definition of necessity 1: the quality or state of being necessary 2 a: pressure of circumstance b: physical or moral compulsion c: impossibility of a contrary order or condition 4a: something that is necessary - REQUIREMENT b: an urgent need or desire - in such a way that it cannot be otherwise

10. COVID-19 cure would arrive in an vaccine, being developed at Warp Speed.
11. COVID-19 Vaccines are both safe and effective.
12. COVID-19 Vaccines will be voluntary.
13. COVID-19 Vaccination would enable New Zealanders to regain their lost freedoms.

160. All of the above (paragraph 159) the narrative points are false, partial facts, or already rebutted by the science of COVID-19. In respect to point 1; "COVID-19 is caused by a novel pathogen SARS-CoV-2" is moot as many people who test positive with PCR are not symptomatic. The proven isolation of the SARS-CoV-2 virus is a contentious matter,¹⁷⁸ however, it appears to be that the 'bug' is a FACT. COVID-19 PCR diagnostics are not required for NZ Health authorities, to class some deceased individuals as, "died from COVID-19", despite no diagnostic test result done confirming clinical diagnosis.

161. To counter claim 5's assertion; *COVID-19 in early 2020 had no known cure amongst available medicines and therapeutics, in the global medicine cabinet*; one significant FACT has been the level of censorship and denial by Authorities of the efficacy of early treatment of COVID-19 symptoms, using cheap generic drugs, is testament to the FACT that the COVID-19 gods demanded suppression of all treatments utilising generic, and off patent drugs. The COVID-19 gods demanded expensive, novel technology solutions and medications for their human stock.

162. World Council for Health, a science and evidence based medicine collaboration that formed to promote good health, developed; "Early Covid-19 [treatment](#) guidelines: A practical approach to home-based care for healthy families" published September 23, 2021 updated January 6, 2022.¹⁷⁹ All of the drugs, medicines and therapeutics referenced

¹⁷⁸ It is not my intent to prove or disprove the existence of SARS-CoV-2 that's been done affirmatively. I assert with the evidence provided elsewhere that the 'virus' or bug is a man made product of the bioweapons programs (gain of function research must be offensive to consider counter or defence measures such as vaccines to deadly chimeric viral entities) of the military industrial complex (militarism is an extension of an extremely exploitative tendency in some men and women) that holds the world in thrall. The controversial and global response to COVID-19 and the closed minded determination to 'vaccinate the planet – vaccine is the only cure' despite masses of contrary evidence is a clear indication of high level malevolent intent of those directing the global play (Shakespeare's Globe Theatre is metaphor). When one adds the copious funding arrangements where international finance constraints are temporally disconnected allowing (western) governments to increase their debt levels through massive qualitative easing is more evidence of a convergence of interest in a specific and/or developing COVID-19 outcome. "Always follow the money" is a basic focus of any forensic investigation. Evidence points to the FACT of a SARS-CoV-2 viral entity: <https://www.technocracy.news/mercola-yes-sars-cov-2-is-real-virus/> Love confirmed FACTS.

¹⁷⁹ World Council for Health "Early Covid-19 treatment guidelines: A practical approach to home-based care for healthy families" published 23 September 2021, updated 10 January 2022: <https://worldcouncilforhealth.org/resources/early-covid-19-treatment-guidelines-a-practical-approach-to-home-based-care-for-healthy-families/>

in the early treatment guidelines are approved medicines in NZ, under the Medicines Act 1981.

163. All of the above (from paragraph **159**) narrative points 1-13 would be disposed of, where New Zealand's health authorities and DHBs, adopted evidence based medicine practice, and followed international collaborations amongst clinicians, who searched for and found remedies, and cures formalised as treatment protocols, for their ill patients.

164. The COVID-19 gods' actors, go to great length to destroy public confidence, in the therapeutic use of off label generic drugs. One example is the [Surgisphere](#)¹⁸⁰ science scandal, directed at disestablishing any research into the efficacy of hydroxychloroquine (HCQ), in low dose clinical trials for the early treatment of COVID-19 patients. Surisphere used poor data to discredit HCQ as an effective treatment. At the time New Zealand and more nation states were trialling low dose HCQ for COVID-19 treatment, which was discontinued when Lancet published the Surisphere findings. HCQ use in clinical practice, or trials has not resumed (in the West), despite the published paper being disposed of and retracted. Ivermectin has suffered similar suppression and demonisation, including from the US FDA, despite ivermectin's proven efficacy for COVID-19 treatment and general acceptance. Ivermectin is on the WHO list of medical requirements for each nation, for the treatment of its residents.

165. In the meantime NZ Customs, on the orders of MoH, are blocking private [importations](#)¹⁸¹ of medicines, that individuals and their medical practitioners might prescribe under the Medicines Act, for symptomatic relief from COVID-19 illness.

180 Guardian article; "Surgisphere: governments and WHO changed Covid-19 policy based on suspect data from tiny US company" published 3 Jun 2020, *Surgisphere, whose employees appear to include a sci-fi writer and adult content model, provided database behind Lancet and New England Journal of Medicine hydroxychloroquine studies*: <https://www.theguardian.com/world/2020/jun/03/covid-19-surgisphere-who-world-health-organization-hydroxychloroquine> In other words they are scientific vandals who spread a lie.

181 Covid-19: Ivermectin import attempts grow five times despite warnings against use" published 3 November 2021: <https://www.stuff.co.nz/national/health/coronavirus/300444030/covid19-ivermectin-import-attempts-grow-five-times-despite-warnings-against-use> extract from the article which is strongly **biased against use of ivermectin for the treatment of COVID-19 patients despite it's proven efficacy**; *The number of Kiwis attempting to import ivermectin, a drug touted overseas as an alternative – and unproven – treatment for Covid-19, ballooned nearly five times in a month. Ivermectin is a prescription medicine approved for a limited number of conditions in New Zealand, including an intestinal disease caused by roundworm (strongyloidiasis), certain parasites in blood or tissue, or for scabies after prior treatment has failed. It is also used to treat parasites in livestock. Internationally it has been touted as a Covid-19 treatment or cure, but there is little evidence to support those claims. It is dangerous in high doses, and medicines safety authority Medsafe has published a warning about its use for Covid.*

166. Medsafe September 2021 [advisory](#),¹⁸² stressed that the importation of ivermectin for COVID-19 treatment is not recommended, unless prescribed by an authorised medical practitioner. The subtlty is nuanced as Medsafe/MoH are ordering seizure of authorised medical practitioners' imports of Covid-19 generic drugs such as ivermectin.

167. Whereas, Professor Robert [Clancy](#),¹⁸³ from the University of Newcastle, expert on immunology, offers a sensible approach to early treatment of COVID-19 patients, in his [interview](#)¹⁸⁴ with Dr John Campbell; "Immunology with Professor Robert Clancy," provides the audience with an informative description on the science and clinical application of immunity, in respect to the stages of the COVID-19 infection; first in the mucous membranes of the nasal and throat passages, and if it passes through into the lungs, COVID-19 triggers a systemic immune response, which is the inflammatory stage.

168. It is likely that a New Zealander who is COVID-19 Vaccination certified and has a Vaccine Passport, will soon find that their passport is [invalid](#)¹⁸⁵ without evidence of being boosted. Note: I state that it is *likely* the State will Order, or Legislate to require one to be

182 **You can not make this shit up!** Alert communication: Medsafe and the Ministry of Health strongly recommends that ivermectin is not used for prevention or treatment of COVID-19. Risks of importing or prescribing ivermectin for prevention or treatment of COVID-19 6 September 2021: <https://www.medsafe.govt.nz/safety/Alerts/ivermectin-covid19.htm> more; Medsafe has recently seen an increase in the attempted personal importation of ivermectin. Ivermectin is a prescription medicine typically used to treat parasites in humans. It is also used for prevention of heartworm in small animals and treating parasites in various animals. Ivermectin is NOT APPROVED to prevent or treat COVID-19, which means that Medsafe has not assessed the safety and efficacy for this use. Inappropriate use of ivermectin can be dangerous.

183 **At last sanity:** Professor Robert Clancy Emeritus Professor of Pathology at the University of Newcastle Medical School' member of the Australian Academy of Science's COVID-19 Expert Database, essay on the Australian TGA decision to block doctors from prescribing ivermectin for COVID-19 patients; "A Sad and Shameful Day for Australian Medicine," published 13 September 2021:

<https://quadrant.org.au/opinion/public-health/2021/09/a-sad-and-shameful-day-for-australian-medicine/>
184 Dr John Campbell; "Immunology with Professor Robert Clancy" <https://youtu.be/FPPnyzvO7J4?t=1938>
Prof Clancy provides the audience with an informative description on the science and clinical application of immunity in respect to the stages of the COVID-19 infection first in the mucous membranes of the nasal and throat passages and if it passes through into the lungs Covid triggers a systemic immune response which is the inflammatory stage. The time stamp is set to 32:18mins into the video where Dr John Campbell asks Prof Clancy about the beneficial use of early treatment protocols. It is interesting to note that they are cautious with their language because of censorship in respect to the mention of words such as ivermectin or hydroxychloroquine. **This is evidence of the suppression of practical health science in plain sight.**

185 News Article MoH: "1.2 million eligible for booster shots from today; 44 people in hospital; 5 in ICU" published 5 January 2022. From today, anyone aged 18 and over who had their second vaccination at least four months ago can get their booster dose. <https://www.health.govt.nz/news-media/news-items/12-million-eligible-booster-shots-today-44-people-hospital-5-icu> more; *People can book an appointment with the COVID Vaccination Healthline team on 0800 28 29 26, or they can visit a walk-in vaccination site. More than 5,300 booster shots were administered yesterday (5,328). From 17 January 2022, people can book boosters at BookMyVaccine.nz if it's been four months since their second dose. Those who had their second dose at least 6 months ago, can book an appointment now through Book My Vaccine. From January 17, children aged between 5-12 will be eligible for the vaccine, those aged 12 and over are already eligible.*

boosted for ongoing validation of '[my vaccine pass](#)',¹⁸⁶ where Members refuse to entertain this Petition.

169. The requirement for boosters no matter whether one, two, three or twenty three is significant evidence that the present offering of COVID-19 Vaccinations are useless at stopping infection, or transmission of COVID-19. New Zealand has contracted for the purchase of millions more COVID-19 Vaccines from various corporations. Emergent evidence from the UK and elsewhere, indicates that COVID-19 Vaccination appears to [compromise immunity](#)¹⁸⁷ indefinitely against the virus. Who knows what else?

170. New Zealand vaccine passports become invalid after 6 months, or 1 June 2022, whichever is sooner. In foreign jurisdictions the requirement for booster shots to maintain vaccine passport authorisation are increasingly a legal necessity. There appears to be no definitive maximum number of COVID-19 Vaccinations, to satisfy the alleged 'health imperative' of the COVID-19 gods, rather the goal posts are moved on the whim of the arbitrary authority.

NZ COVID-19 Vaccine Rollout engages NZ BORA sections 8-11

171. Legal responsibility stops with YOU the REPRESENTATIVES who LEGISLATE COVID-19 Acts, the direct result of which is; ***the human harm and carnage that is caused.***

172. The NEW ZEALAND COURTS show no indication that they will interpret THE LAW in proper fashion.

173. NZ Parliamentary Representatives, must fix the mess and carnage YOU have created. It is a fact that the COVID-19 PFIZER VACCINE (including all Covid vaccines), is risky, with resultant death a real possibility and likelihood.

174. Section 8 of the BILL OF RIGHTS ACT 1990 under the title [life](#)¹⁸⁸ ***and security of the person*** is engaged:

¹⁸⁶ "My Vaccine Pass" My Vaccine Pass is an official record of your COVID-19 vaccination status for use in Aotearoa New Zealand: <https://covid19.govt.nz/covid-19-vaccines/covid-19-vaccination-certificates/my-vaccine-pass/> re Vaccine Pass longevity; *It will expire 6 months from the date of issue, or on 1 June 2022, whichever comes sooner. We have set an expiry date to allow flexibility in how we respond to the changing nature of the pandemic. Get boosted and boosted..*

¹⁸⁷ "Official data suggests the Triple Vaccinated are developing Acquired Immunodeficiency Syndrome at an alarming rate;" The Expose Jan 15 2022: <https://weliveinamadworld.com/uk-data-shows-triple-vaccinated-developing-aids-at-an-alarming-rate/> There will be more deleterious effects as time will reveal.

¹⁸⁸ NZ BORA Sections 8-11 title ***Life and security of the person***:
<https://legislation.govt.nz/act/public/1990/0109/latest/whole.html#DLM225505>

8 Right not to be deprived of life

No one shall be deprived of life except on such grounds as are established by law and are consistent with the principles of fundamental justice.

175. FACT: NZ citizens (and natural persons), are being killed, as a result of being injected with the Pfizer COVID-19 Vaccination product.

176. Where the New Zealand Government makes false statements about the safety of the Pfizer COVID-19 Vaccination product, and forces it on citizens (and natural persons), it is contributing to the killing. There can be no freely given informed consent, by any individual, where the full nature and extent of the risk of the COVID-19 Vaccines, are withheld.

177. The act of Culpable [Homicide](#)¹⁸⁹ engages sections 158 and 160 of the Crimes Act 1961. The crime is genocide at the courts of the world. More criminal charges might follow, where NZ Police become motivated to properly investigate the COVID-19 matter.

9 Right not to be subjected to torture or cruel treatment

Everyone has the right not to be subjected to torture or to cruel, degrading, or disproportionately severe treatment or punishment.

178. New Zealand's inhabitants (natural persons), have been terrorised into being injected with the Pfizer COVID-19 product. The level of propaganda is phenomenal; [paid media](#)¹⁹⁰ complicit in promoting fear of COVID-19, infomercials by select academics, and [advertisements](#)¹⁹¹ for the Pfizer product by the New Zealand Government. Pfizer doesn't need to promote its product, as the NZ Government is taking care of business.

179. To be forced into unemployment or ostracized from society and its milieu, for a decision in respect to a medical procedure, is perverse and means people; ***are subjected to torture or to cruel, degrading, or disproportionately severe treatment or punishment.*** Consider the plight of any who [KNOW](#),¹⁹² that the Pfizer COVID-19 mRNA

189 Crimes Act 1961 Section 160 Culpable Homicide:

<https://www.legislation.govt.nz/act/public/1961/0043/latest/DLM329302.html>

190 NZD\$55million Journalism funding: NZ On Air will fund public interest journalism through a three-year package designed to support 'at risk' journalism: <https://www.nzonair.govt.nz/funding/journalism-funding/>

191 UK Daily Mail Article 4 May 2021; "New Zealand's Covid-19 vaccine advert goes viral as Kiwis praise the slickly produced video that 'perfectly sums up the nation's unique attitude' - as students perform a stirring Haka:" <https://www.dailymail.co.uk/news/article-9541075/New-Zealands-Covid-19-vaccine-advert-goes-viral-Kiwis-praise-Covid-19-information-video.html#v-6325238193237769091>

192 Open Vaers provides accessible public information about post vaccine injury and death based on VAERS data: <https://openvaers.com/covid-data/mortality> 2021 mortality from all COVID-19 Vaccines was

COMIRNATY product is toxic, and it's potential to cause untold damage to one's body. Consider the stress forced upon the individual faced with the poison chalice decision; to be injected or not, balanced against the blackmail of losing one's job, and the economic and social ramifications of that. That is the choice forced on people by the NZ Government. Discrimination practiced against those who refuse COVID-19 Vaccination, is unlawful when considered, in light of [section 21](#)¹⁹³ the **Human Rights Act of 1993**.

21 Prohibited grounds of discrimination

(1) For the purposes of this Act, the prohibited grounds of discrimination are—

(h) disability, which means—

(vii) the presence in the body of organisms capable of causing illness:

(j) political opinion, which includes the lack of a particular political opinion or any political opinion:

180. Where the petitioner has accurately interpreted the Governments' COVID-19 response, in relation to the LAW in NZ as being unlawful, then any act to discriminate against any person based on their COVID-19 Vaccination status, whether reflected in a 'Vaccine Passport' or otherwise, is illegitimate and ***ultra vires***.

181. Those who are harmed, as a direct cause of the Pfizer COVID-19 COMIRNATY Vaccine (any COVID-19 Vaccine), are suffering torture of the most horrific type, particularly where they foresee a lifetime of punishment, for their effort on behalf of the team. Their [medical](#)¹⁹⁴ practitioner may deny, that the injury or harm is COVID-19 Vaccine related, as the medical profession are propagandised, into a false belief that the COVID-19 Vaccines are [safe](#)¹⁹⁵ and effective; A hypothetical typical Doctor Whomever might say to a COVID-19 Vaccine injured patient; "your condition must have been latent", or, "your myocarditis is a

21948 deaths. A further 769 deaths to 14 January 2022 the carnage continues, how many injured and seriously?

193 Human Rights Act 1993 Section 21 Prohibited grounds of discrimination:

<https://legislation.govt.nz/act/public/1993/0082/latest/whole.html#DLM304475> 21 Prohibited grounds of discrimination, (1) For the purposes of this Act, the prohibited grounds of discrimination are— (h) disability, which means— (vii) the presence in the body of organisms capable of causing illness: and; (j) political opinion, which includes the lack of a particular political opinion or any political opinion:

194 "Reiner Fuellmich and Dr. Sam White - There is no immunity for coordinated effort to murder"

<https://rumble.com/vrsdt1-reiner-fuellmich-and-dr-sam-white-there-is-no-immunity-for-coordinated-eff.html> Reiner Fuellmich , Viviane Fischer and Dr. Wolfgang Wodarg interviewing Dr. Sam White about ongoing legal processes in the UK and global organized manslaughter and the legal situation around it.

195 "Anna Hodgkinson recalls her harrowing experiences supporting her daughter Casey- with Liz Gunn" published on youtube 8 December 2021: <https://www.youtube.com/watch?v=WBQQ3ThJCWM> Casey Hodgkinson has been severely disabled as a direct result of accepting a COVID-19 Vaccination. It was initially denied that Casey's disability could be caused by the 'safe and effective' vaccine. How many others suffer the same fate at the hands of an unsympathetic medical profession to the FACT of COVID-19 Vaccine injury and harm?

result of [pandemic](#) stress.”¹⁹⁶ The novel disease of pandemic stress, might have larger morbidity than from the alleged novel coronavirus known as SARS-CoV-2.

182. Justice Palmer makes the [case](#)¹⁹⁷ at clause [21] of his judgement, in the Four Midwives judicial review, that the **section 11 right to refuse a medical intervention** was engaged. Palmer J further asserts that the COVID-19 Public Health Response Act 2020 as of the 8 November 2021 [hearing](#)¹⁹⁸ and as [enacted](#)¹⁹⁹ 13 May 2020 anticipated COVID-19 vaccination in early 2020, despite the contrary advice from the Justice Ministry, in respect to its 11 May 2020 declaration of consistency with BORA;

*Mr Perkins, for the Crown, submits s 4 of the Act envisages potentially coercive powers and s 11(1)(a) is a wide, plenary power. Its scheme and purpose are designed to facilitate democratically accountable Ministers taking flexible, and sometimes coercive, action to respond to a public health emergency. He stresses the breadth of the text of the chapeau. He submits s 11(1)(a)(v) is an apposite description of what the Order does. He points to s 9 as contemplating that Orders may limit rights, including the right to refuse medical treatment. He submits that safeguards ensure such limits are not unjustifiable and suggest Parliament was conscious it was delegating wide plenary powers. He submits the Act should be interpreted in the context of general constitutional safeguards including the right to judicial review and Mr Perkins accepts the principle of legality is engaged in relation to coerced medical treatment. He submits s 11(1)(a) is not general or ambiguous but is unmistakably plain. He relies on the Court of Appeal’s judgment in *Borrowdale v Director-General of Health*.*

No jurist to this point, pay any heed to the law stated in articles 4 and 7 of ICCPR.

183. Palmer J also concurred with Cooke J who heard a challenge by four aviation security service employees at the border at para [74] Palmer J states;

Cooke J also said “[i]t is perhaps of some surprise that such an important aspect of the response to the risk of COVID-19 has been implemented through a section that makes no express reference at all to vaccination.” Because the generally expressed empowering provision does not expressly address vaccination, he noted a degree of uncertainty arises from its use as the basis of such an order. And he said:

196 UK Evening Standard article 10 December 2021; “Up to 300,000 people facing heart-related illnesses due to post-pandemic stress disorder, warn physicians.” <https://www.standard.co.uk/news/health/post-pandemic-stress-disorder-heart-conditions-covid-london-physicians-b969436.html>

197 Four Midwives judgement by Justice Matthew Palmer November 2021 case CIV-2021-485-584 [2021] NZHC 3064: <https://www.courtsofnz.govt.nz/assets/cases/2021/2021-NZHC-3064.pdf>

198 COVID-19 Public Health Response Act 2020 as of 26 November 2021: <https://legislation.govt.nz/act/public/2020/0012/294.0/096be8ed81b8274a.pdf>

199 COVID-19 Public Health Response Act 2020 at Assent 13 May 2020: <https://legislation.govt.nz/act/public/2020/0012/30.0/096be8ed819df2c5.pdf>

It may be that significant measures of this kind are better suited to legislation that squarely addresses the issues that arise from the measures. None of this means that the Order is invalid, but neither should my conclusion be interpreted as clearing a path for more extensive use of this power for other circumstances.

To which Palmer stated at his para [75] **I concur**. (Petitioner's emphasis)

184. The Petitioner holds the view, that the Order is invalid. Any law is invalid, which overreaches and expands beyond its intended scope as legislated. The Ministry of Justice (MoJ), "[Consistency](#)"²⁰⁰ with the New Zealand Bill of Rights Act 1990: COVID-19 Public Health Response Bill", published 11 May 2020, make clear MoJ's considered interpretation of the extent of the powers envisaged: **it's ok to test, but, not to medicate**. If there's derogation of a fundamental right granted by legal statute, then it per se violates the intent and spirit of the law.

185. The current "circumstances" (the Covid response), are a clear and present danger to the public, caused not by any virus or disease, but by "emergency mandates" under the guise of authority (colour of authority). Therefore, any "extension" of these measures, already beyond the purview or scope of the law, is a violation of said law, and ought be acknowledged, **ultra vires**.

186. It may be that the foregoing represents, the actions of rulers making it up as they go, or rather, as directed from outside the Nation State's democratic and lawful structures. Cardiff Professor of Italian and Critical Theory, Fabio Vihgi, makes part of the case for an organised COVID-19 conspiracy in his well sourced [essay](#),²⁰¹ and observes;

Joining the dots is a simple enough exercise. If we do so, we might see a well-defined narrative outline emerge, whose succinct summary reads as follows: lockdowns and the global suspension of economic transactions were intended to 1) Allow the Fed to flood the ailing financial markets with freshly printed money while deferring hyperinflation; and 2) Introduce mass vaccination programmes and health passports as pillars of a neo-feudal regime of capitalist accumulation. As we shall see, the two aims merge into one.

187. The memo, directing governments to implement forced vaccinations, may not have been delivered until a later point in the Covid experiment. WHO in it's 13 April 2021 advice,

²⁰⁰ Ministry of Justice "Consistency with NZ Bill of Rights Act 1990: COVID-19 Public Health Response Bill" published 11 May 2020: <https://www.justice.govt.nz/assets/Documents/Publications/COVID-19-Public-Health-Response-Bill.pdf>

²⁰¹ "A Self Fulfilling Prophecy: Systemic Collapse and Pandemic Simulation" by Fabio Vihgi Professor of Politics Cardiff University, published 16 August 2021: <https://thephilosophicalsalon.com/a-self-fulfilling-prophecy-systemic-collapse-and-pandemic-simulation/>

cautioned the world to carefully balance any policy decision to enforce COVID-19 Vaccination upon resistant, or reluctant populations, or demographics. The Petitioner senses the mask memo happened around May or June 2020.

188. In any event the likelihood of discovery, and full disclosure of who was directing the play in NZ is moot. The FACT that the US FDA [resists](#)²⁰² making public its data and files on the Pfizer COVID-19 mRNA Vaccine product, despite earlier US Court directions to do so, is cause for interest and inquiry. New Zealand approvals often rely on FDA data and/or prior approvals.

10 Right not to be subjected to medical or scientific experimentation

Every person has the right not to be subjected to medical or scientific experimentation without that person's consent.

Jacobson v. Massachusetts – US case law

189. In [Jacobson](#)²⁰³ v. Massachusetts, 197 U.S. 11 (1905)

[Source](#)²⁰⁴ of following extract; “Jacobson v Massachusetts: It’s Not Your Great-Great-Grandfather’s Public Health Law” published April 2005.

As the 20th century began, epidemics of infectious diseases such as smallpox remained a recurrent threat. A Massachusetts statute granted city boards of health the authority to require vaccination “when necessary for public health or safety.” In 1902, when smallpox surged in Cambridge, the city’s board of health issued an order pursuant to this authority that required all adults to be vaccinated to halt the disease. The statutory penalty for refusing vaccination was a monetary fine of \$5

202 Till the recent decision by the Texas Court expediting FDA FOIA release of Pfizer documents the FDA was dragging the chain and obfuscating: <https://www.washingtonpost.com/opinions/2021/12/13/55-years-fulfill-records-request-clearly-fda-needs-serious-reform-its-data-sharing-practices/>

203 Justia US Supreme Court, “Jacobson v. Massachusetts, 197 U.S. 11 (1905)” <https://supreme.justia.com/cases/federal/us/197/11/>

204 “Jacobson v Massachusetts: It’s Not Your Great-Great-Grandfather’s Public Health Law” published April 2005: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1449224/> extracted Abstract; Jacobson v Massachusetts, a 1905 US Supreme Court decision, raised questions about the power of state government to protect the public’s health and the Constitution’s protection of personal liberty. We examined conceptions about state power and personal liberty in Jacobson and later cases that expanded, superseded, or even ignored those ideas. Public health and constitutional law have evolved to better protect both health and human rights. States’ sovereign power to make laws of all kinds has not changed in the past century. What has changed is the Court’s recognition of the importance of individual liberty and how it limits that power. Preserving the public’s health in the 21st century requires preserving respect for personal liberty. (Petitioner’s emphasis)

(about \$100 today). There was no provision for actually forcing vaccination on any person.

Henning Jacobson refused vaccination, claiming that he and his son had had bad reactions to earlier vaccinations. The Massachusetts Supreme Judicial Court found it unnecessary to worry about any possible harm from vaccination, because no one could actually be forced to be vaccinated: "If a person should deem it important that vaccination should not be performed in his case, and the authorities should think otherwise, it is not in their power to vaccinate him by force, and the worst that could happen to him under the statute would be the payment of \$5." Jacobson was fined, and he appealed to the US Supreme Court.

On behalf of the majority of the Bench Justice Harlan

Although he largely deferred to the legislature, Harlan noted that requiring a vaccination for certain people with certain health conditions would be cruel and inhumane. This would justify a court in shielding them from the enforcement of the law. The Massachusetts law did not suggest that it would lead to this result, though, and the plaintiff did not show that he had a medical condition that made him unfit for vaccination.

Also;

The police power of a State, whether exercised by the legislature, or by a local body acting under its authority, may be exerted in such circumstances or by regulations so arbitrary and oppressive in particular cases as to justify the interference of the courts to prevent wrong and oppression.

The 2005 article and commentary on the applicability of Jacobson v Massachusetts notes for our illumination;

For example, it noted that the law should not be understood to apply to anyone who could show that vaccination would impair his health or probably cause his death.

Nevertheless, Jacobson has been used in US courts to [justify](#)²⁰⁵ legislated, or forced COVID-19 Vaccination.

²⁰⁵ Jacobson vs Massachusetts, Wikipedia:

https://en.wikipedia.org/wiki/Jacobson_v._Massachusetts#Subsequent_developments A lot of cases rely on the law as outlined in Jacobson, however, further discussion by the Petitioner will point to the difference between the nature of the smallpox vaccine and the experimental COVID-19 Vaccines most developed with novel methods and technologies making the comparison ludicrous. For one thing the smallpox vaccines apparently had high efficacy.

190. Where COVID-19 Vaccines were proven with a known safety profile, Jacobson might apply to assist with the NZ Government's policy, to limit or derogate from section 11 BORA *Right to refuse to undergo medical treatment*, however, the respective injections are different species all together and cannot be reconciled. There is a marked difference between the [smallpox vaccination](#)²⁰⁶ and any of the COVID-19 [injectables](#)²⁰⁷ including Pfizer's COMIRNATY, BNT162b2 [mRNA] Vaccine.

191. In Jacobson, the smallpox vaccine was not experimental. It was proven effective and had a low death rate. [Smallpox](#)²⁰⁸ is a highly lethal disease, with a case fatality rate of up to 30% depending on the type of smallpox. A smallpox epidemic may fall within the scope of a public emergency that threatened the life of the community, potentially justifying the administration a "proven vaccine or inoculation." The smallpox vaccine produces sterilising antibodies resulting in herd immunity in the community, where it is deployed. Mandatory inoculation, with a proven **safe** product, may be consistent with the exigencies of the situation and most would accept that and volunteer for the inoculation. There was also no reason advanced in the case, to believe Jacobson would have been harmed by the vaccine.

192. With COVID we have a quite different situation. The new "mRNA vaccines", have been through a foreshortened and expedited approval process, which in the US enabled the Pfizer product to attain "Emergency Use Approval" (EUA), and in New Zealand Provisional Approval. Stage 4 Post Market testing, is reflected in the novel COVID-19 Vaccines being administered to the whole population, which is unprecedented. Long term safety data is unknown. The **safety** of the mRNA COVID-19 Vaccines is doubted, by independent scientists and clinicians.

The Petitioner asserts that the mRNA injectables are medical experimentation, not treatment as in Jacobson.

193. COVID-19 Vaccines are novel and still under trial, as long term adverse effects are being collated for assessment, both by the corporations producing the products (Pfizer and more), and the government health authorities who provide regulatory oversight. Medsafe has not provided full approval, for reasons that the full data, on the safety and efficacy of the Pfizer (and more) COVID-19 Vaccines are not collated, or known, rather it issued

206 History of the development of smallpox vaccines, Wikipedia:

https://en.wikipedia.org/wiki/Smallpox_vaccine

207 Dr. Ray Sahelian MD retired blog: <https://www.raysahelian.com/> Dr Sahelian says; "I am convinced that the benefits promoted by experts on TV regarding these vaccines are much less than what they promise, and the adverse reactions are significantly more than they want us to believe. The effects of these vaccines on the human body are infinitely more complex than anyone can imagine... a million shades of gray, you may say."

208 Smallpox is a lethal disease with death an outcome in ~30% of cases depending on the type of smallpox virus agent: <https://en.wikipedia.org/wiki/Smallpox>

Provisional Approval under a later amended [section 23](#)²⁰⁹ clause of the Medicines Act 1981.

194. COVID-19 (alpha variant) had an IFR of at most 0.15% (compared with 0.1% for the average seasonal flu), but possible only a fraction of that figure, given the known falsification of death records and lack of seroprevalence data, to ascertain the real infection denominator. SARS-CoV-2 is no more a “deadly mutating virus” than seasonal influenza, despite the claims of the NZ Government, or its Attorney General Hon David [Parker](#), when attempting to justify the Government's derogation from NZ BORA, at the NZ Centre for Public Law event December 2021.²¹⁰ Subsequent strains to Alpha variant appear to be associated with less morbidity. Where Alpha is similar in morbidity to influenza, and Omicron is similar to a cold, it is therefore clear, there is not a risk to the life of the country from the virus. The risk to the nation is caused by the COVID-19 Response.

195. There are safe proven alternatives available, so there is no reason to take risks. There may be a political imperative determined by the COVID-19 gods, however, the logic of mere mortals such as this humble Petitioner, fails to make sense of Vaccinating everyone, if health is the imperative.

196. The Pfizer COVID-19 Vaccine product does not produce sterilising antibodies, so it cannot result in herd immunity. Hence there is no public benefit and so no reduction in **risk to the life of the country** whether one is Vaccinated or otherwise. The Vaccinated may create a large risk to the health system, where their long term immune system response is compromised by the COVID-19 Vaccine.

197. According to Pfizer, their COVID-19 Vaccine product was only designed to reduce symptoms in the recipient. As such it is equivalent to a Tetanus or Diphtheria vaccine, which also only benefit the recipient. They do not, and cannot, create herd immunity. The claim is, that with less patients to treat in hospital, there is a public benefit, in that more people can get medical treatment they might have missed out on with higher demands on hospitals from symptomatic COVID-19 patients. This of course, ignores the availability of primary and or early treatments, that would significantly reduce hospitalisations.

209 Medicines Act 1981 Section 23(1) as amended 25 May 2021, by section 4 of the Medicines Amendment Act 2021 (2021 No 16): <https://www.legislation.govt.nz/act/public/1981/0118/latest/DLM55061.html> now reads; 23 Minister may give provisional consent (1) Notwithstanding sections 20 to 22, the Minister may, by notice, in accordance with this section, give provisional consent to the sale or supply or use of a new medicine if the Minister is of the opinion that it is desirable that the medicine be sold, supplied, or used.

210 “Hon David Parker, The legal and constitutional implications of New Zealand's fight against Covid” address given to this NZ Centre for Public Law event at Victoria University 6 December 2021: <https://www.wgtn.ac.nz/public-law/events/past-events/2021-events2/hon-david-parker-the-legal-and-constitutional-implications-of-new-zealands-fight-against-covid> In this address, the Attorney-General, Hon David Parker, spoke about the legal and constitutional implications of New Zealand's response to the COVID-19 pandemic, changes to the response prompted by the Delta variant, implementation of the COVID-19 Response Framework and the underlying Bill of Rights issues.

198. It is not appropriate for the Courts to sit back and say “the executive has decided it is safe and effective, so we are staying out of it”. Holding the Executive to account, is one of the key reasons for having a judiciary under a Rule of Law balance of powers structure. In Jacobson the Court was only to defer “in the first instance”, not when the decision is challenged by medical/scientific experts.

199. In the 4 aviation workers case, Cooke J wrongly applied the test of when it is reasonable to derogate from *section 11 BORA right to refuse medical treatment*, rather than, also acknowledging *section 10 scientific experimentation is engaged*. He held, that if there was some remote chance there might be some public benefit from the vax, that was sufficient to derogate from the right in a free and democratic society. **That is not the test set out in Article 4 ICCPR or Jacobson.** Further society is no longer free.²¹¹

FACT the PFIZER COVID-19 VACCINE is an experiment

200. FACT the COVID-19 mRNA gene therapy injectable science experiment is a failure²¹². It is a failure for reasons of safety; toxicological, autoimmune deficiencies, and

211 Sure there are degrees of freedom in a free society, where a prisoner is denied right to free movement and more constraints resulting from a presumed guilty finding and sentencing, a free person is no longer free, in a state that applies arbitrary constraints. One of NZ's values in the Flag Referendum was Freedom see **endnote #225** and note what the 2015/2016 Flag Referendum Statutory Panel said: *The panel reported that **feedback found the themes of freedom, history, equality, respect and family to be the most significant to New Zealanders** – go figure what New Zealand's people want their society to be ground within.. **ordinary people want interesting and stable free democratic states to foster their respective human potential. Respect involves trust and trust requires evidence.***

212 “What if the largest experiment on human beings in history is a failure? A report from an Indiana life insurance company raises serious concerns.” by Robert W Malone MD, MS published 3 January 2022 <https://rwmalonemd.substack.com/p/what-if-the-largest-experiment-on> Dr Malone; A seasoned stock analyst colleague texted me a link today, and when I clicked it open, I could hardly believe what I was reading. What a headline. “Indiana life insurance CEO says deaths are up 40% among people ages 18-64”. This headline is a nuclear truth bomb masquerading as an insurance agent's dry manila envelope full of actuarial tables. People frequently write to Jill and myself. People we have never met. They call, they arrive at the farm by appointment or unannounced, they fill our email in boxes with their inquiries. They all want something; time, attention, an interview. Many want to tell us about their fear, illness, nightmares, or (what often seems like) outright paranoid conspiracies. And then, over time, these fears and “conspiracies” keep getting confirmed. As Jan Jekielek (a senior editor with The Epoch Times) recently said to me, it is getting harder and harder to tell which ones are mere conspiracy theories and which are true reality. One farm visitor told me of his foreshadowing massive numbers of deaths within three years consequent to the genetic vaccines, and that this was all about the “Great Reset” and the depopulation agenda of the World Economic Forum (WEF). I tried to reassure him that, in my opinion, this was highly unlikely- while privately thinking about how easily people fall into this type of conspiracy ideation, and how I need to be careful to avoid going there when confronting so many public health decisions that appear either incompetent or nefarious. At the time, I only knew of the WEF as the host of a big annual party in Davos Switzerland where the uber rich and the hoi oligoi of the Western nations went to watch Ted talks, drink the best wine, see and be seen. Silly me. What a long, strange trip this has been. I doubt that even Hunter S. Thompson could have imagined it in his most drug and booze added state. Suffice to say, I nominate Ralph Steadman as official illustrator of the SARS-CoV-2 pandemic. Or a resurrected Hieronymus Bosch. But I am wandering from a point that I am afraid to clearly state. It is starting to look to me like the largest experiment on human beings in recorded history has failed. **And, if this rather dry report from a senior Indiana life insurance executive holds true,**

mutagenic effects, including the the tragic mortality and harm to people who suffer myocardial, and pericardial failure, blood clots including strokes, and for women who are pregnant, or breast feeding injury to the baby, and more hundreds of listed injury risks in Pfizer's FDA documentation made public through US FOIA process.

201. Experimental mRNA injectables as currently employed, are not an answer to any question relating to human health and wellbeing. From the Petitioner's perspective of the COVID-19 experiment, it is obvious that future oversight, and ethics, of any biotechnology research ought be transparent, and easily reviewed by an interested public in real time. The PFIZER COVID-19 VACCINE (and more COVID-19 Vaccines) is an experiment with global reach.

202. Weaponisation of a disease, no matter the pretext must be banned forthwith, for it is evil. Where the various laws relating to bioterrorism are deficient, they require amendment. Where any are blackmailed to participate in a corrupt scheme, which involves terrorising the population, it invokes the [Terrorism](#)²¹³ Suppression Act 2002. Section 5 bears upon our COVID-19 pandemic problem and the Authoritarian response;

5 Terrorist act defined

(1) An act is a terrorist act for the purposes of this Act if—

(a) the act falls within subsection (2); or

(b) the act is an act against a specified terrorism convention (as defined in section 4(1)); or

(c) the act is a terrorist act in armed conflict (as defined in section 4(1)).

(2) An act falls within this subsection if it is intended to cause, in any 1 or more countries, 1 or more of the outcomes specified in subsection (3), and is carried out for the purpose of advancing an ideological, political, or religious cause, and with the following intention:

(a) to induce terror in a civilian population; or

(b) to unduly compel or to force a government or an international organisation to do or abstain from doing any act.

(3) The outcomes referred to in subsection (2) are—

then Reiner Fuellmich's "Crimes against Humanity" push for convening new Nuremberg trials starts to look a lot less quixotic and a lot more prophetic. (Petitioner's emphasis)

²¹³ Terrorism Suppression Act 2002 Section 5 *Terrorist act defined*:

<https://www.legislation.govt.nz/act/public/2002/0034/55.0/DLM152702.html>

(a) the death of, or other serious bodily injury to, 1 or more persons (other than a person carrying out the act):

(b) a serious risk to the health or safety of a population:

*(c) destruction of, or serious damage to, property of great value or importance, or **major economic loss**, or major environmental damage, if likely to result in 1 or more outcomes specified in paragraphs (a), (b), and (d):*

*(d) **serious interference** with, or serious disruption to, an infrastructure facility, if likely to endanger human life:*

(e) introduction or release of a disease-bearing organism, if likely to devastate the national economy of a country.

203. The Petitioner asserts, the NZ Government must know that the SARS-CoV-2 viral entity is a result of the global bioweapons program, and its release is deliberate, or an accident, though more likely a deliberate actor (it only takes one nefarious actor to throw the bomb or pull the trigger, or infect the Wuhan Military Games 18-26 October 2019). It is either extreme opportunism or sythesised response from a **global health syndicate** of actors, given the full spectrum globally organised response, at least of the West, where the cabal has power. The NZ Government's purposeful and deliberate use of the **COVID-19 is the plague** pretext to goad the population with fear, is terrorism as defined by the Act. Additionally there are large harms perpetrated by Authority in the COVID-19 Response.



²¹⁴ Screen capture from C19legacy.com number killed account denied treatment throughout the COVID-19 Pandemic as at 1 February 2022

Denial of COVID-19 early treatment is organised injury and harm

204. It is painful to know, that competent medical personnel, clinicians, nurses and researchers, were denied access to safe and effective COVID-19 drugs and therapies, that treated COVID-19 patients successfully in in-patient trials and as formalised protocols, once repeatedly proven in clinical practice. None died of treatment from anti viral and anti inflammatory medicines, where the treatment was provided early and properly; correct medication for each stage of COVID-19 infection, and dose is critical, as with any treatment. There is negligible ivermectin adverse event reported injury or death despite four (4) billion prescribed doses since the 1990s. Early treatment is sufficient to end the pandemic, presently of those who contract COVID-19, almost all, 99.85% recover and retain lasting immune protection. Those who do not contract COVID-19, already have sufficient immunity to the virus, potentially through prior contact with more and different

²¹⁴ Screen capture 1 February 2022: <https://c19legacy.com/> 3,172,308 unnecessary deaths: Based on adoption and early outpatient use of the current best treatment when it was known to be effective from multiple studies at $p = 0.01$ (ivermectin from Oct 9, 2020, and HCQ from May 19, 2020), and adjusting for the estimated fraction of the world that adopted these treatments. The total number of COVID-19 deaths is 5,638,849. This is gross negligence or malevolence or worse genocide. We know that the memo was sent wide. All governments have restricted or denied ivermectin and hydroxychloroquine except for a few outliers polite society and the MSM fail to mention; India, Brazil, Africa prophylactically against parasites.

coronaviruses. Medical science knows there is cross immunity through infection with other common coronaviruses, as in the case of virus particles associated with common colds.

205. Many died through denial of early treatment, which again engages Sec 8 *Right not to be deprived of life*. Is denial of early treatment a part of the COVID-19 experiment? It certainly engages law in respect to, due diligence and duty to care for the welfare of the people. What was the outcome of any review into the denial of medical treatments? In which other disease do health authorities, and clinicians, generally deny early treatment of infectious patients – deny treatment to lower the pathogenicity of the infecting agent? Authorities have denied treatment,²¹⁵ prolonged suffering and facilitated unnecessary death. Science,²¹⁶ not ideology is key to anything.

206. Early treatment guidelines²¹⁷ formalised into a general protocol by the World Council for Health, might be referred to the Health Select committee for discussion with MoH Officers.

207. The Petitioner's October 2021 evidence to the Health Select Committee in respect to the COVID-19 Public Health Response Amendment Bill (No 2²¹⁸), the Petitioner offered much in the way of scientific research, which established the following findings as listed in the paper²¹⁹;

Summary of Findings

215 Authorities have denied treatment and prolonged suffering and facilitated unnecessary death study C19legacy webpage: <https://c19legacy.com/> as of 26 Jan 2022 - 3,225,696 unnecessary deaths.

216 Science or ideology? The NZ university at the crossroads" 26 January 2022: <https://www.newsroom.co.nz/science-or-ideology-the-nz-university-at-the-crossroads> Extracted opening: *No matter how intense or heated the discussion may be, NZ universities need to address the difference between ideology and science, writes Elizabeth Rata. Opinion: New Zealand's universities are at a defining crossroads. Do we remain a universitas, a community of scholars developing knowledge according to the universal principles and methods of science or do we continue down the path of a racialised ideology? The science-ideology battle is nothing new to universities. Dialectical materialism was the ruling ideology in Stalin's Soviet Union. Christianity was the ideology in the pre-Darwinian centuries of English universities. In post-1980s' New Zealand it is the racial ideology of two political categories of people defined by their ancestry.*

217 World Council for Health; "Early Treatment Guidelines A Practical Approach to Home Based Care for Healthy Families" what more could one ask for? <https://worldcouncilforhealth.org/resources/early-covid-19-treatment-guidelines-a-practical-approach-to-home-based-care-for-healthy-families/>

218 COVID-19 Public Health Response Amendment Bill (No 21): <https://www.legislation.govt.nz/bill/government/2021/0068/latest/whole.htm#LMS552303>

219 Greg's evidence to the Health Committee re COVID-19 Public Health Response Amendment Bill (No 2): <http://values-compasspointsinaposttruthworld.blogspot.com/2021/10/gregs-evidence-to-health-committee-re.html> extract of one point on fear and budgeting; *From the outset of the Covid-19 phenomena every bit of information was politicised. Fear was employed to drive people to seek security from the scourge of being infected with the Covid distemper. Why would a government that prides itself on facilitating societal wellbeing including using wellbeing indicators to frame its budget use fear to attain a nefarious agenda? All new spending must advance one of five government priorities: improving mental health, reducing child poverty, addressing the inequalities faced by indigenous Maori and Pacific island people, thriving in a digital age, and transitioning to a low-emission, sustainable economy. New Zealand's change in policy represents a shift that economists have long theorized could be a more effective use of government spending.*

1. *It is one thing to make a mistake and rectify it upon the discovery of superior knowledge, it is another thing entirely to isolate oneself from reason and truth by doubling down and compounding the error.*
2. *What is reported as science is a limited fraction of the available knowledge from critically minded clinicians, medical scientists and publicly available sources.*
3. *Dr John Ioannidis, Stanford epidemiology, most recent paper (version July 2021) on the Covid-19 distemper's lethality places the overall infection fatality rate at 0.15% which is extremely age stratified and afflicts those already immune compromised and or with comorbidities.*
4. *The key driver to apprehend in the development of the Covid pandemic is fear.*
5. *The Covid-19 solution is early treatment not more oppressive jackboots and denials of human rights.*
6. *The murder count caused through health authorities refusing early treatment for Covid-19 sufferers is approaching 3 million dead.*
7. *The risk-benefit calculus is therefore clear: the experimental vaccines are needless, ineffective and dangerous. Actors authorising, coercing or administering experimental COVID-19 vaccination are exposing populations and patients to serious, unnecessary, and unjustified medical risks.*
8. *The evidence is overwhelming that society doesn't need more novel expensive drugs and vaccines with dubious safety profiles. Where early treatment is afforded Covid-19 symptoms sufferers the much vaunted overrun of New Zealand's hospital capacity will be avoided now and into the future where there is the necessary reopening of the nation to foreign travellers and returning NZ residents.*
9. *My testimony and evidence finds that the Original Covid Response Act is an unlawful imposition in that is unnecessary and more harmful to society than the 'non pandemic' it aims to prevent. (My reference to "non pandemic" is an attempt to identify the hype and politicisation that are automatic supporters of every new twist and turn in the Covid saga)*
10. *The New Zealand Government's Covid response has negatively impacted all the areas mapped to underpin and facilitate social and individual wellbeing in "Our living standards framework."*

208. MoH Officers, and other Experts who [pronounce](#)²²⁰ in the public space, on behalf of the official Covid-19 narrative, and offer facts that contradict the foregoing, are wrong in FACT.

11 Right to refuse to undergo medical treatment

Everyone has the right to refuse to undergo any medical treatment.

209. Dr Guy Hatchard sums up the developing COVID-19 story in his [essay](#),²²¹ published 31 January 2022; "Time to Bring Government and Media to Account". A couple of passages:

The mRNA Vaccine is Not Effective

Long before the mandates came in there was abundant data that the vaccine waned in effectiveness rapidly.

There was also worrying data that areas with high vaccine rates around the world did not have low case numbers and low deaths.

Therefore there was insufficient data to warrant coercion.

All this has been hashed over in so many blogs and letters to the government.

As a statistician, I am very clear from such anomalous data that there are other factors at work that need to be researched very carefully.

Did we get that?

No, we got mandates and we got interdepartmental messaging that the threat of Covid to health was so dire that we could ignore basic principles of disclosure.

Independent watchdogs such as the Advertising Standards Authority were convinced by this dishonest drivel to take a hands off stance.

²²⁰ Lawyer and politician Sue Grey; *Explaining a bizarre and very concerning OIA response from MinHealth about NZ's anti viral of choice for COVID-19, Remdesivir. "I couldn't understand why they chose this as the treatment of choice. It turns out that they can't explain either"* 26 January 2022 video post: <https://www.facebook.com/sue.grey.9469/videos/4956868354358534> OIA answer Facebook photos of the two (2) page response: <https://www.facebook.com/sue.grey.9469/posts/1028299084392528> The OIA answer from MoH states a doctor might prescribe any medicine off label to treat any disease with patient free consent, however, the same MoH Orders Customs to confiscate imports of medicines that might be useful for the treatment of COVID-19 specifically ivermectin and hydroxychloroquine. Catch 22 hypocrisy.

²²¹, Time to Bring Government and Media to Account" by Guy Hatchard, 31 January 2022: <https://hatchardreport.com/time-to-bring-government-and-media-to-account/>

The latest data released by the UK government itself under OIA puts total deaths solely due to Covid over the whole period of the pandemic at 17,000 not the 155,000 we have been frightened with.

210. To further underpin the Petitioner's thesis, the anti-thesis is provided by [Ian Powell](#),²²² who attempts to [counter](#)²²³ a LinkedIn post by a David Page. In Ian Powell's and David Page's words;

Page's attack is more on my comments about what was required to ensure such a low death rate (the elimination of community transmission through zero tolerance strategy) than vaccine implementation. In his own words:

Your pride in NZ's 'achievement' speaks volumes and is typical of a small-mindedness that pervades NZ's response.

What of the impact on general health from deferred ops? The social effects on children, families and livelihoods from domestic violence to loss of income to mental health? What, indeed, was the economic cost to be borne by generations to come?

You do not refer either to fortress NZ, a state without natural immunity, isolated by propagandised fear, and dependent therefore on a program of booster upon booster, with no end in sight.

Conveniently, you do not refer either to the persecution of 40% of Kiwi, many of whom are health professionals – victimised with livelihoods destroyed by mandates that are an abomination in any democratic, liberty-loving nation claiming to value human rights, kindness and inclusivity of all citizens.

Typically for a health technocrat, you don't consider the full balance sheet – you present the same old hackneyed upbeat, backslapping 'achievements' that puffed up media types project onto a dejected, fed up populace too tired to argue.

One measure of success is the mortality rate, but on every other measure, NZ has failed. A hermit state is a dead one.

²²² Ian Powell about on Otaihangasecondopinion: <https://otaihangasecondopinion.wordpress.com/about/>
Extracted bio (note Ian Powell is not a doctor); *Executive Director of the Association of Salaried Medical Specialists, the professional union representing senior doctors and dentists in New Zealand, for over 30 years, until December 2019. He is now a health systems, labour market, and political commentator living in the small river estuary community of Otaihangā (the place by the tide). This blog offers second opinions on these issues by drilling deeper into them. "I'm here not to let you be contented with too little."* (William Morris) He has an MA in History and Political Science from the University of Canterbury and a Diploma of Industrial Relations from Victoria University of Wellington.

²²³ "Trashing New Zealand's pandemic response" blog by Ian Powell, published 27 January 2022:
<https://otaihangasecondopinion.wordpress.com/2022/01/27/trashing-new-zealands-pandemic-response/>

This was followed by a brief 'call to arms' declaring that "We can't let this propaganda [my article (Ian Powell's article)] go unchallenged". Four presumably co-thinkers are highlighted in this second post. An embryo of a campaign?

The evidence the Petitioner presents in their paper suggests the view or perspective of David Page is closer to alignment with truth and FACT, than that of Ian Powell.

211. Along with Sections 8, 9 and 10, [Section 11 of BORA](#)²²⁴ ought be made sacrosanct, as it is obvious that the law must be written to forestall a repetition, or another version, of the COVID-19 RESPONSE being employed to **force** any medicine, or injectable, or other technology, upon any individual, no matter the circumstances.

212. The proposed amendment would make clear, that New Zealand's constitution reflects rule of law principles, and respects, and upholds the life, and security of its citizens (all natural persons) – it is elegant, in that the solution is applied only to those rights, under the heading; **Life and security of the person** – The Petitioner urges you to enact the following amendment to NZ BORA;

5A Unjustified limitations

None of Sections 4, 5, 6 provide any justified limits on rights and freedoms contained in sections 8, 9,10 and 11.

BORA legislation in review

213. Following is Sir Geoffery Palmer's [perspective](#)²²⁵ written in 2015, reflecting on 25 years of the operation of BORA and comparing it with other Commonwealth and US jurisdictions. Sir Geoff²²⁶ closes his review with the following comments (written 2015);

224 Section 11 BORA *Right to refuse to undergo medical treatment: Everyone has the right to refuse to undergo any medical treatment:*

<https://legislation.govt.nz/act/public/1990/0109/latest/whole.html#DLM225505>

225 "What the New Zealand Bill of Rights Aimed to do, Why it did not succeed and how it can be repaired" by Sir Geoffery Palmer 2015 (various published forms and dates): <https://www.wgtn.ac.nz/public-law/publications/nz-journal-of-public-and-international-law/previous-issues/volume-14-issue-2-december-2016/Palmer.pdf>

226 Sir Geoffery Palmer (from the essay) *Barrister; Distinguished Fellow, Faculty of Law and New Zealand Centre for Public Law, Victoria University of Wellington; Global Affiliated Professor of Law, University of Iowa. A version of this article was presented to the Legal Research Foundation Conference marking 25 years of the New Zealand Bill of Rights Act and 800 years of Magna Carta, Auckland, 25 September 2015. I have benefitted from comments by Mai Chen, Associate Professor Joel Colón-Ríos, Professor Claudia Geiringer, Professor Mark Hickford, Sir Kenneth Keith, Dr Matthew Palmer QC as he then was and Professor Margaret Wilson. Research and editorial work was performed by Rachel Opie. This work stimulated the project to prepare and publish a codified written constitution for New Zealand that was supported by the Law Foundation: Geoffrey Palmer and Andrew Butler Constitution Aotearoa New Zealand (Victoria University Press, Wellington, 2016). The book was published on 21 September 2016.*

There are serious challenges ahead for public policy in New Zealand. The global geopolitical situation raises many issues. Economic turmoil could occur and populist sentiments could produce ugly outcomes. The transformational changes that will be necessary because of climate change will challenge the delivery of fairness to people in our society. Preservation of the liberal democratic state seems important. It would be better to bed in something solid before adverse events occur. In these senses the reforms here being advocated are conservative, designed to preserve fairness and democratic values. The basic human rights principles we have enacted and with which we have now had 25 years' experience should be elevated in the degree of protection they enjoy in the New Zealand legal system.

Despite the introduction of MMP, New Zealand still lacks the necessary checks and balances on the use of public power that it lacked in 1984. A unicameral legislature is capable of breaching human rights and has done so since the NZ Bill of Rights Act was passed. But, both the government machine and the courts now have some facility with NZ Bill of Rights Act issues and how they impact on government decision-making. It would be safe enough now to elevate the status of the NZ Bill of Rights Act, and it can be done so as to insulate court decisions on it against reversal by a simple majority in Parliament. It can be inferred from the relatively conservative interpretations that the courts have given the Bill that the system of government and the body politic will not be unduly disturbed by such a development.

The Parliament does not rigorously analyse human rights issues and lacks the institutional mechanisms for doing so. Our constitutional law is too thin and the flexibility of the public law system knows no limits. This sets up a situation where, if we do not act:

The death of democracy is not likely to be an assassination from ambush. It will be a slow extinction from apathy, indifference and undernourishment.

214. Whilst Sir Geoff Palmer was prescient in his summation of the ground in which NZ and its constitution is situated, he missed the fact that the destruction of the Bill of Rights would be by ambush, in a global operation run on behalf of a particular set of interests – and definitely not in the public interest, which is for health and wellbeing in freedom and democracy.

Many thanks for the opportunity to share the foregoing.

I trust it aids in your search for truth in Law.

Greg Rzesniowiecki

Attached to the this paper, please review

Addendum A: Case to NZ Police report 30 October 2021 from paragraph 111

Attention NZ Police: Report of the homicide of many New Zealanders (30 October 2021)

From: Greg Rzesniowiecki, Public Advocate

Subject: Information that leads to potential charges of Culpable Homicide Sec 160 of the Crimes Act 1961, for a large number killed by those coercing and or mandating the New Zealand population be Vaccinated with Pfizer Comirnaty mRNA injection product.

[1] Crimes Act 1961;

Sec 158 Homicide defined

Homicide is the killing of a human being by another, directly or indirectly, by any means whatsoever.

and

Sec 160 Culpable homicide

(1) Homicide may be either culpable or not culpable.

(2) Homicide is culpable when it consists in the killing of any person—

(a) by an unlawful act; or

(b) by an omission without lawful excuse to perform or observe any legal duty; or

(c) by both combined; or

(d) by causing that person by threats or fear of violence, or by deception, to do an act which causes his or her death; or

(e) by wilfully frightening a child under the age of 16 years or a sick person.

(3) Except as provided in section 178, culpable homicide is either murder or manslaughter.

(4) Homicide that is not culpable is not an offence.

[2] Following is the testimony of Naturopath Lynda Wharton in her letter to Prime Minister Jacinda Ardern in respect to the carnage caused to New Zealanders who are coerced and now mandated to accept the Pfizer Comirnaty mRNA injection product.

The letter is posted to Lynda Wharton's Facebook page and maybe hasn't been sent to NZ PM Jacinda Ardern, nevertheless, it highlights Lynda's experience and insight into the human carnage, death and injury caused through Pfizer Comirnaty mRNA injection product – as such it is testimony to factual matters.

Lynda runs a facebook page “The Health Forum NZ” which gathers testimonials from those who have been injured by Covid Vaccination in New Zealand. The Vaccination product is the Pfizer Comirnaty mRNA injected product.

Please read Lynda Wharton's extensive letter and consider that the stories of affliction caused from the Vaccine are representative of the trauma inflicted upon many who are Vaccinated, available here:

<https://www.facebook.com/groups/thehealthforumnz/posts/486348905798871/>

A LETTER TO OUR PRIME MINISTER

Dear Jacinda,

I am a New Zealander...a mother and a grandmother.

The closest i have been to you was when we jiggled side by side in the VIP area of a U2 concert a couple of years ago. I remember thinking how tiny and pretty you were.

I am a sensitive empath, and watching the pain in your eyes as you comforted the bereaved and traumatised after the mosque massacre, and White Island...i thought i recognised the same in you.

I know your Misinformation Officer will quickly find this post and hopefully share it with you...

I am taking it upon myself to share a grassroots snapshot in time, of the immense suffering so many of your people are enduring right now.

I host a community of nearly 35,000 New Zealanders whose lives have been changed by the Covid 19 vaccine.

Many who gather here are living with the daily legacy of suffering serious adverse reactions to our "safe and effective" covid solution.

Some are paralysed or have lost their health and vitality as a result of a stroke, heart attack, blood clot or myocarditis after their jab.

Others are dealing with a paralysed face, or ongoing extreme exhaustion, crippling pain or daily headaches that see them confined to bed for weeks on end.

When they try to share their story (as many thousands tried to on your recent face book post), they are smashed with angry vitriol...cries of "misinformation" and "antivaxer"...even though they were "pro vax" enough to roll up their sleeve for the needle.

Having unexpectedly created a safe place for these marginalised and injured to gather, gives me daily insight into a New Zealand story the likes of which most unwitting Kiwi's have no awareness of. All they hear every day is "safe and effective....and they trust you and believe it.

The personal interactions i have with these families will leave a permanent heavy record in my heart.

I often think of the family whose beautiful brilliant medical specialist daughter is left permanently crippled by her post jab stroke.

Or the 22 year old woman who had to learn to walk and talk again after her stroke, following the jab she didnt want to have, but gave in to, in order to keep her job.

The family just 3 weeks ago who are wracked with trauma and grief after their precious 14 year old son collapsed dead in their garden, 3 days after his jab.

I have literally hundreds of such stories to share with you....as do the many who tried, unsuccessfully, to do so on your recent face book post.

You wont see a single one of them on the 6 o'clock news, the 1 o'clock update or the front page of the Herald.

Of course i realise that the vast majority of Kiwis will have their jab and have nothing more than a sore arm...but for many others life is changed and these broken

Kiwis (who did the right thing!!) deserve our compassionate acknowledgement and care, not our scorn and disbelief.

And now there is a new tsunami of grief and suffering growing....the thousands of New Zealanders who are now faced with a choice they believed would never be forced upon them.

Do they take a jab, that for a myriad of reasons they have chosen not to have....or do they lose their job, vocation, career of decades?

While some will find the fear of unemployment and financial destitution enough to drag them, kicking and screaming to the vaccine tent...

For others, no amount of pressure, coercion or personal cost will be enough to wrestle a consent from their arm.

I have received hundreds of messages from these soon to be unemployed experts.

We are set to loose literally thousands of years of vocational experience from the New Zealand work force. Doctors, nurses, teachers, psychiatrists, midwives and more. Yes even an Orthopedic Surgeon and a Forensic Psychiatrist will be walking. Some who are new to their careers and still paying off student loans....others with 20 or 30 years of valuable experience.

To those who have already had their jab, this might seem pure insanity. Why would a professional with everything to lose, not just simply call in to the vax centre at the end of a work shift, and be done with the turmoil, pressure and angst?

I'll share just a tiny few of the myriad reasons these incredible people have shared with me.

The reasons can be grouped, and the first group hinges on TRUST.

Try as they might, some just cannot rationalise their way into a place of trusting either Pfizer, or you and our Government.

They struggle to believe that the largest corporate and pharmaceutical felons in history can just be "trusted" with a rapidly developed, novel technology, medical product with absolutely ZERO long term safety data.

They also struggle with knowing that the contract our Government signed with Pfizer is confidential, and includes (this much we know) 100% liability protection for Pfizer.

These injured Kiwi's I've spoken about...if they are lucky their financial care will come from ACC (its not a given though). That's us. The tax payers. An "all care, no responsibility" contract with a pharmaceutical company with a track record like Pfizer, simply does not inspire confidence in those who do their due diligence.

Others of these smart and educated professionals (including many medics) have spent many hours reading the clinical trial papers, following the government adverse reaction (and efficacy) databases around the world.

They are deeply concerned by what they see. Unprecedented serious injury and death, the likes of which have never been witnessed with a vaccine before. With the exception of the many times inflated risk of heart inflammation in young males, the other serious injuries (or worse) seem to be randomly meted out as a form of medical Russian Roulette.

There is another group of soon to be unemployed, who have health issues that in any "ordinary" times, would see them exempted or even contraindicated from receiving this vaccine. Long histories of blood clots, heart attacks, neurodegeneration conditions, and yes even previous severe and life threatening allergic reactions. Instead they find themselves mandated, terrorised and terrified....including those who nearly died from their first dose, and are simply told they MUST have their second dose in a hospital with a crash cart and a resuscitation team at hand.

Then comes the group, often also encompassing the first two groups, who will walk away from their career as a stand for medical freedom.

These people believe that capitulating against their will to take a medical intervention, with unprecedented evidence of damage from around the world, is the greater of two evils.

Those with intelligence have so many unanswered questions...

Why do they not have the option of presenting a negative saliva test twice a week to ensure they are safe in the work place? (firstly....why do we not have \$20 saliva tests available like the rest of the world?)

Why is an "immunity passport" based on evidence of covid antibodies from previous infection, not enough to safely keep their job?

Why has our Government put no effort into providing us with an effective Early Treatment Outpatient program such as that used with overwhelming success by Dr Peter McCullough or Dr Zelenko? Instead those in MIQ are offered panadol while they wait to see if their infection will lead them to ICU.

Why are we not checking the vitamin D status of every man woman and child in the land, and providing them with safe and effective doses of vitamin D...now that we know so clearly that low vitamin D makes us a sitting target for both infection and a poor outcome (and we have endemic vitamin D deficiency in NZ with our "sun smart" messaging).

Why have we not used the last 20 months to educate, empower and lead our nation into a better state of health....starting with sharing the brutal truth that obesity greatly increases your risk of ICU and death.

Why have you done everything in your power to block our access to Ivermectin when the evidence of both the safety and efficacy for prevention and treatment of Covid is overwhelmingly positive?

Why are we not having any national debate and discussion around the risk/benefit analysis of vaccinating our children? New Zealanders have simply not been informed that their children face virtually no risk of a poor outcome from covid (unless their child is already severely health compromised). They are similarly unaware that their children face very real risks from taking the vaccine, including up to 25 times the usual risk of heart inflammation (young males), along with its potentially life shortening consequences.

Why do most New Zealanders not understand that as double vaccinated they can still both contract and transmit covid, get seriously ill from covid and die of covid.

We just have to look at the heavily vaccinated countries like Singapore, Israel and UK, to see that it will take much more than this "leaky" vaccine to put an end to our misery.

Why have New Zealanders not been told that the vaccine passport they covet, will likely disappear into thin air if they refuse to consent to a booster every six months in order to be considered "fully vaccinated"...along with the repeated re exposure to serious health risks.

I think enough has been said.

Your people are hurting....the vaccine injured or bereaved; the mandated and disillusioned, frightened and no longer trusting; and all those who have chosen (for a myriad of rational reasons) to decline the jab, and are now vilified, attacked, belittled second rate citizens in their own country.

Right now our nation has never felt more divided.

Mental health has never felt more thread bare. And never before have more questions been left unanswered.

Jacinda...

Its not too late for you to show the same compassion we witnessed as you embraced the traumatised Muslims at the mosque.

Its not too late to work with your people instead of against them.

<https://www.youtube.com/watch?v=vYF8bnmdQfY>

<https://www.youtube.com/watch?v=Y4MViwU3XOo>

<https://www.medsafe.govt.nz/COVID-19/vaccine-report-overview.asp>

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8481107/>

<https://www.technologyreview.com/2021/07/30/1030390/vaccinated-getting-covid-delta-mask-mandate-superspreaders/>

<https://www.bmj.com/content/371/bmj.m3872/rr-5>

----- ends -----

Considerations and findings

[3] It is a fact that Vaccination with Pfizer Comirnaty mRNA injection product kills people.

Screen capture is from a Facebook post Friday 29 October 2021.



Big read; "Why are we vaccinating children against COVID-19?" published August 2021:

<https://www.sciencedirect.com/science/article/pii/S221475002100161X>

[4] The NZ Government is both coercing and mandating Covid Vaccination through Covid Vaccination Orders made under the Covid-19 Public Health Response Act's power to delegate to the Minister.

[5] The Minister (NZ Government) uses the power to make orders, mandating that people in groups; certain occupations and as individuals people who desire access to society's cultural milieu; theatre, concerts, cafes etc, accept Vaccination with the Comirnaty mRNA

gene therapy toxin (it is by definition a toxin as the human body mounts an immune response to it).

[6] In New Zealand more have been killed by Pfizer's Comirnaty mRNA injection product than died with Covid by at least an order of magnitude.

Evidence: see Appendices A and B for anonymised data sets which indicate the numbers killed and injured as a result of being Vaccinated.

[7] Additionally Covid-19 symptom curatives were withheld in New Zealand and overseas, I draw your attention to Australia where the TGA (Therapeutic Goods Agency) has banned the use of ivermectin for Covid-19 symptom treatment, itself an infringement on a doctor's right to treat a patient to the best of their ability with informed consent for any treatment offered:

<https://www.tga.gov.au/media-release/new-restrictions-prescribing-ivermectin-covid-19>

[8] C-19 Legacy website highlights the numbers murdered (culpable homicide definition by NZ Crimes Act 1961) globally caused directly through the denial of early treatment.

<https://c19legacy.com/> The murder count is approaching 3 million dead of the total Covid death count.

[9] Early treatment study <https://c19early.com/> demonstrates the efficacy and safety of Covid-19 early treatment with generic and off patent drugs and therapies.

<https://ivmmeta.com/> is a review of ivermectin and other early treatment protocols with considerable data and sourced references as to the efficacy demonstrated in the studies.

[10] New Zealand's Government and Health authorities have kept NZ locked up and or borders closed plus various emergency decrees since March 2020 for which endgame? Did the NZ Government intend keeping New Zealand locked down till the Pfizer Comirnaty mRNA injection product was available? The NZ Government denied that there was any other cures or therapies, which is a Big Lie (see paragraph [53]).

Mikki Willis documentary film maker's short video featuring Dr Zev Zelenko and his Zelenko Protocol to prevent and or treat Covid and viral infections, also highlights the politicisation of cheap generic drugs by governments and MSM media platforms:

<https://plandemicseries.com/zstack/>

[11] The Government used the discredited PCR test as a diagnostic tool to determine Covid cases, whereas a PCR denominated case may be uninfected by the SARS-CoV-2 virus.

A peer review of the paper on which most Covid PCR testing is based has comprehensively debunked the science behind it, finding major flaws. They conclude it is utterly unsuitable as a means for diagnosis: <https://cormandrostenreview.com/report/>

This paper will show numerous serious flaws in the Corman-Drosten paper, the significance of which has led to worldwide misdiagnosis of infections attributed to SARS-CoV-2 and associated with the disease COVID-19. We are confronted with stringent lockdowns which have destroyed many people's lives and livelihoods, limited access to education and these imposed restrictions by governments around the world are a direct attack on people's basic rights and their personal freedoms, resulting in collateral damage for entire economies on a global scale.

There are ten fatal problems with the Corman-Drosten paper which we will outline and explain in greater detail in the following sections.

For completeness here is the original Corman-Drosten paper which global PCR testing for Covid-19 was based upon: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6988269/>

More information raising concerns about Christian Drosten:

http://enformtk.u-aizu.ac.jp/howard/the_classified_drosten_files/

[12] Pfizer's Comirnaty product is authorised by NZ Government through a provisional approval under the Medicines Act which itself is deceptive as provisional approval was only intended for a medicine for a "limited number of patients" not for New Zealand Government participation in a global Vaccine experiment for the benefit of international interests including Pfizer's owners, by coercing and mandating its population to be Vaccinated. Medicines Amendment Bill passed under Urgency and in force from May 2021:

<https://www.legislation.govt.nz/bill/government/2021/0041/latest/whole.html#LMS496437>

New Zealand has extended the Provisional Approval of Pfizer Comirnaty mRNA injection product until November 2023, notice dated 28 October 2021:

<https://www.medsafe.govt.nz/COVID-19/status-of-applications.asp>

[13] Why is the Pfizer Comirnaty mRNA injection product the only cure to Covid-19 symptoms considered by this NZ Government?

Other treatments are available and proven both more effective and safer as they have virtually no adverse reactions and definitely no deaths from treatment reactions.

The Pfizer Comirnaty mRNA injection product has been sold to people as being highly effective, whereas it's absolute efficacy is less than a 1% benefit over not being Vaccinated:

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7996517/> from the abstract of the paper:

Reporting absolute risk reduction measures is essential to prevent outcome reporting bias in evaluation of COVID-19 vaccine efficacy.

[14] **I assert that killing of people as a result of their being forcibly injected with the Comirnaty Covid-19 mRNA Vaccination product under duress (coercion or mandate) is culpable homicide as per Sec 160 of the Crimes Act. Where Vaccination causes injury it is criminal assault.**

NZ Crimes Act 1961 version as at 5 October 2021

Homicide

Section 158 "Homicide defined"

Homicide is the killing of a human being by another, directly or indirectly, by any means whatsoever.

<https://legislation.govt.nz/act/public/1961/0043/latest/whole.html#DLM328520>

Issue then is culpability

Section 160 "Culpable homicide"

(1) Homicide may be either culpable or not culpable.

(2) Homicide is culpable when it consists in the killing of any person—

(a) by an unlawful act; or

(b) by an omission without lawful excuse to perform or observe any legal duty; or

(c) by both combined; or

(d) by causing that person by threats or fear of violence, or by deception, to do an act which causes his or her death; or

(e) by wilfully frightening a child under the age of 16 years or a sick person.

(3) Except as provided in section 178, culpable homicide is either murder or manslaughter.

(4) Homicide that is not culpable is not an offence.

Further Section 167 of the Crimes Act "Murder defined"

Culpable homicide is murder in each of the following cases:

(a) if the offender means to cause the death of the person killed:

(b) if the offender means to cause to the person killed any bodily injury that is known to the offender to be likely to cause death, and is reckless whether death ensues or not:

(c) if the offender means to cause death, or, being so reckless as aforesaid, means to cause such bodily injury as aforesaid to one person, and by accident or mistake kills another person, though he or she does not mean to hurt the person killed:

(d) if the offender for any unlawful object does an act that he or she knows to be likely to cause death, and thereby kills any person, though he or she may have desired that his or her object should be effected without hurting any one.

Which disposes of any problem about intent to kill, as the act of killing many individuals resulting from the NZ Government's Vaccination program is an incontrovertible fact.

[15] Those accused as culpable for murder and/or manslaughter are;

- New Zealand Government Ministers and officials, their agencies and contractors in their all of government approach to Covid, and;
- The Fourth Estate or the legacy mainstream media who used fear and biased information (lies) as a stick to beat the population to submit to being Vaccinated with the Pfizer Comirnaty mRNA injection product, and those who advise the Government from the science and or academic community, and;
- Any person or party yet to be discovered.

[16] **Specific persons to be investigated for their participation in the crime are;**

- The Prime Minister, Deputy Prime Minister, Health Minister, Covid Response Minister and relevant heads of departments, Managements that enforce Vaccination mandates, Vaccinators;
- Heads and editors of media organisations at; RNZ, Newshub, OneNews/TVNZ, Herald/NZME, Stuff, The Guardian, and more of the smaller platforms all promote the same paranoid fear of Covid-19 symptoms and that the only cure is the Vaccine;
- Public figures such as Professor Michael Baker, Associate Professor Siouxsie Wiles, Professor Sean Hendy, Associate Professor Helen Petousis Harris and more who promote Vaccination and demand mandates or strong coercive measures to encourage uptake.

[17] To underline the point of bias and misdirection given to the public from the MSM news media, this post from Lynda Wharton on a Newshub article about the people that spoke up to the Prime Minister when she asked about adverse reactions on her Facebook timeline.

PM Jacinda Ardern's facebook post 26 September 2021 asking people about adverse reactions generated 35,000 comments:

<https://www.facebook.com/jacindaardern/posts/10158140116102441>

Newshub article 1 October 2021; "COVID-19: Top researcher questions Jacinda Ardern letting social media posts be 'polluted' with anti-vaccination comments" by Zane Small:

<https://www.newshub.co.nz/home/politics/2021/10/covid-19-top-researcher-questions-jacinda-ardern-letting-social-media-posts-be-polluted-with-anti-vaccination-comments.html>

Newshub's attitude to those injured through Vaccination is to label them as anti-vaxxers an absurdity in itself given the cause of their injury or close connections' death.

Lynda notes that Newshub's ownership is held by large hedge fund operations that also have significant holdings in Vaccine producers including Pfizer (I will attach the content of this from a private group The Health Forum NZ **Attachment 1**):

<https://www.facebook.com/groups/thehealthforumnz/posts/473272630439832/>

Further two published articles by Newsroom dated 28/29 October 2021 indicate the chasm between those peddling the 'official Covid narrative' compared to those who know that there is a large number of New Zealanders killed and injured account of Vaccination by Pfizer's Comirnaty mRNA injection product.

A. Marc Daalder writes; "Medsafe's vaccine safety reports misused by anti-vaxxers"

<https://www.newsroom.co.nz/medsafes-vaccine-safety-reports-misused-by-anti-vaxxers>

B. Ex MP The Hon. Peter Dunne writes; "It's only the unvaccinated who matter now"

<https://www.newsroom.co.nz/peter-dunne-the-unvaccinated-are-those-who-matter>

In both articles the whole of the problem of the "Covid pandemic" and the ability to open the borders and allow people to return to something approaching the freedoms people had as a right prior to Covid is contingent upon the unvaccinated or anti-vaxxers submitting to Vaccination. There is no factual basis to Newsroom writers' presumptions other than arbitrary notions that the unvaccinated are a health problem. Note both articles infer or state specifically that Covid Vaccination is the only method of fighting Covid-19 infection, despite the abundant knowledge that Covid-19 Vaccinated people can become infected, transmit Covid-19 and be hospitalised and or die from Covid-19 symptoms. US CDC page on Covid-19 Vaccinated breakthrough infections:

<https://www.cdc.gov/vaccines/covid-19/health-departments/breakthrough-cases.html>

Note the CDC statement says;

Vaccine breakthrough cases are expected. COVID-19 vaccines are effective and are a critical tool to bring the pandemic under control; however, no vaccine is 100% effective at preventing illness. Some fully vaccinated people will get sick, and some will even be hospitalized or die from COVID-19. However, there is evidence that vaccination may make illness less severe for those who are vaccinated and still get sick. The risk of infection, hospitalization, and death are all much lower in vaccinated people compared to unvaccinated.

The NZ Government is mandating Covid-19 Vaccination despite the serious harms caused by the Vaccines and the fact that there's no long term safety data with the stated advantage decreed by the US CDC being; "However, there is evidence that **vaccination may**

make illness less severe for those who are vaccinated and still get sick. The risk of infection, hospitalization, and death are all much lower in vaccinated people compared to unvaccinated.”

Covid-19 Vaccination is a treatment (neither safe nor effective), it is not a neutralising vaccine. The following blog post by NZ scientists that are associated with “Covid Plan B” draw attention to Peter Doshi’s devastating BMJ critique of the Pfizer vaccine data. Which leaves the Israel experience as our most reliable current guide – and Israel is reporting relative efficacy below 40% whereas the marketing claim is better than 95% effective.

<https://www.covidplanb.co.nz/epidemiology/bmj-critiques-pfizer-data-efficacy-waning/>

[18] The often repeated mantra is “get Vaccinated to get your freedoms back.”

At which point were my freedoms discontinued?

Why is my freedom now conditional upon being Vaccinated?

[19] Were I to travel to Australia (my ancestral home) and return to New Zealand I would be mandated to be Vaccinated – that is Assault under the Crimes Act as I do not consent.

[20] Are these NZ Government and allied 'Vaccinate everyone' actors the ultimate directors of the human carnage and mass murder of people?

Additionally is there a larger conspiracy?

[21] The NZ Government may be working in criminal association with foreign parties - it is self evidently the case when one considers the similarities in actions; Covid responses (lockdowns and mask mandates), talking and narrative points across national borders which diverge from factual knowledge. Everywhere (Western nations) governments and health authorities denied early treatment for Covid-19 symptoms.

Thoughts from Christine Margarete Anderson who is a German politician serving as an Alternative for Germany Member of the European Parliament.

<https://twitter.com/SikhForTruth/status/1454093966715019282> she states in the short video;

“In the entire history of mankind there has never been a political elite sincerely concerned about the wellbeing of regular people. What makes any of us think that it is different now.”

[22] Some higher authority or foreign power appears to be issuing directions for the national leaders and health authorities given the pattern and development of the Covid phenomena. Each stage or moment in the Covid saga is surrounded with controversy.

My papers referenced in paragraphs [63] and [64] provide more detail in respect to the global Covid phenomena.

How did the Covid-19 disease arise?

The earliest stories dispersed in the news media was of an outbreak of a novel respiratory disease in Wuhan China which was then associated with the wet food market, however, 14 of the 41 people who were earliest infected had no association with the Wuhan wet food market:

<https://pubmed.ncbi.nlm.nih.gov/31986264/>

The earliest utterances from the scientific and political community was that the bug responsible called SARS-CoV-2 was a zoonotic emergence, that is a jump from bats to an intermediate species such as a pangolin to humans. Early on the official narrative proclaimed that individuals who suspected a biological laboratory release whether purposeful or accidental as conspiracy theorists, much as anti-vaxxer is used perjoratively against those sceptical of the various Covid-19 Vaccinations on offer and being mandated.

Whereas the truth is that US National Institute for Allergies and Infectious Diseases (NIAID) was funding a mob called Eco Health Alliance led by a Peter Dazsak to undertake Gain of Function research into various pathogens including bat coronaviruses. Some of the scientific experimentation and gain of function work was contracted to the Wuhan Institute of Virology. Officials from the National Institute for Health (NIH) parent of NIAID, categorically denied any knowledge of contracted research into bat coronaviruses. The following thread from the Washington Post's Josh Rogin highlights the duplicity and mendacious denial of knowledge of NIH/NIAID contracted bat coronavirus gain of function research.

<https://threadreaderapp.com/thread/1452787954947088385.html>

Given the extraordinary denial and cover up, SARS-CoV-2 origins is a critical matter to investigate where the world of people and their police forces wish to ensure there is no repeat of the Covid-19 pandemic, through the purposeful or accidental release of biological

pathogens.

[23] I assert the overall Covid response and Vaccination program is a crime against humanity organised by a criminal gang that has personnel at the top of at least the Western nations and global non-government organisations including philanthropic organisations that promote the toxic Covid jabs.

[24] There is no disputing the definition of culpable homicide in the Crimes Act 1961.

[25] There can be no dispute that individuals are being coerced into being 'Vaccinated' and in some occupational areas there are Orders mandating Vaccination to retain employment in those areas.

[26] There is ample evidence that many people are being killed by being Vaccinated.

[27] There is ample evidence that more have died from Vaccination than died with Covid in New Zealand.

[28] There is ample evidence that many thousands are being injured from Vaccination.

[29] Based on the foregoing, I as a reasonable person capable of logical and clear thinking, assert that many more will be killed and injured where the NZ Government continues with the Pfizer Comirnaty mRNA injection product project and Vaccinates more people using its powers of encouragement, coercion and mandates.

[30] COVID-19 Public Health Response (Vaccinations) Order 2021 issued by NZ Government and the schedule of persons or classes of persons mandated to be Vaccinated.

<https://www.legislation.govt.nz/regulation/public/2021/0094/latest/whole.html#LMS487909>

[31] The COVID-19 Public Health Response (Vaccinations) Order 2021 issued by NZ Government now includes Section 7A Exemption from duty under clause 7, however, that exemption takes no account of any other concern an individual might have with the Pfizer Comirnaty mRNA injection product and as such does not mitigate in any sense against the mandate to be Vaccinated which might be the mandate that causes one to be killed or harmed.

[32] There is no recognition of Contentious Objection to any of the Covid-19 Vaccinations. This is critical as the New Zealand Bill of Rights 1990 (BORA) provides;

*Part 2 Civil and political rights**Life and security of the person**Sec 8 Right not to be deprived of life*

No one shall be deprived of life except on such grounds as are established by law and are consistent with the principles of fundamental justice.

Sec 9 Right not to be subjected to torture or cruel treatment

Everyone has the right not to be subjected to torture or to cruel, degrading, or disproportionately severe treatment or punishment.

Sec 10 Right not to be subjected to medical or scientific experimentation

Every person has the right not to be subjected to medical or scientific experimentation without that person's consent.

Sec 11 Right to refuse to undergo medical treatment

Everyone has the right to refuse to undergo any medical treatment.

Sec 13 Freedom of thought, conscience, and religion

Everyone has the right to freedom of thought, conscience, religion, and belief, including the right to adopt and to hold opinions without interference.

Sec 14 Freedom of expression

Everyone has the right to freedom of expression, including the freedom to seek, receive, and impart information and opinions of any kind in any form.

Sec 15 Manifestation of religion and belief

Every person has the right to manifest that person's religion or belief in worship, observance, practice, or teaching, either individually or in community with others, and either in public or in private.

Sec 16 Freedom of peaceful assembly

Everyone has the right to freedom of peaceful assembly.

Sec 17 Freedom of association

Everyone has the right to freedom of association.

Sec 18 Freedom of movement

(1) Everyone lawfully in New Zealand has the right to freedom of movement and residence in New Zealand.

(2) Every New Zealand citizen has the right to enter New Zealand.

(3) Everyone has the right to leave New Zealand.

(4) No one who is not a New Zealand citizen and who is lawfully in New Zealand shall be required to leave New Zealand except under a decision taken on grounds prescribed by law.

Non-discrimination and minority rights

Sec 19 Freedom from discrimination

(1) Everyone has the right to freedom from discrimination on the grounds of discrimination in the Human Rights Act 1993.

(2) Measures taken in good faith for the purpose of assisting or advancing persons or groups of persons disadvantaged because of discrimination that is unlawful by virtue of Part 2 of the Human Rights Act 1993 do not constitute discrimination.

Sec 20 Rights of minorities

A person who belongs to an ethnic, religious, or linguistic minority in New Zealand shall not be denied the right, in community with other members of that minority, to enjoy the culture, to profess and practise the religion, or to use the language, of that minority.

<https://www.legislation.govt.nz/act/public/1990/0109/latest/DLM224792.html>

Covid Responses and Vaccination mandates, vaccine passports and more are direct breaches of NZ's Bill of Rights Act.

Note the COVID-19 Public Health Response Act 2020 provides in Section 9 as follows;

<https://www.legislation.govt.nz/act/public/2020/0012/latest/whole.html#LMS344175>

Sec 9 Minister may make COVID-19 orders

(1) The Minister may make a COVID-19 order in accordance with the following provisions:

(a) the Minister must have had regard to advice from the Director-General about—

(i) the risks of the outbreak or spread of COVID-19; and

(ii) the nature and extent of measures (whether voluntary or enforceable) that are appropriate to address those risks; and

(b) the Minister may have had regard to any decision by the Government on the level of public health measures appropriate to respond to those risks and avoid, mitigate, or remedy the effects of the outbreak or spread of COVID-19 (which decision may have taken into account any social, economic, or other factors); and

(ba) the Minister must be satisfied that the order does not limit or is a justified limit on the rights and freedoms in the New Zealand Bill of Rights Act 1990; and

(c) the Minister—

(i) must have consulted the Prime Minister, the Minister of Justice, and the Minister of Health; and

(ii) may have consulted any other Minister that the Minister (as defined in this Act) thinks fit; and

(d) before making the order, the Minister must be satisfied that the order is appropriate to achieve the purpose of this Act.

(2) Nothing in this section requires the Minister to receive specific advice from the Director-General about the content of a proposed order or proposal to amend, extend, or revoke an order.

There is no legal or lawful justification for the Covid-19 Vaccination mandates. The New Zealand Government is in breach of the New Zealand Bill of Rights Act 1991.

[33] As well as culpability for homicide the NZ Government and allies coercing and or mandating New Zealand citizens and residents to be Vaccinated are injuring many thousands of people through severe adverse reactions caused by Vaccination. Section 190 of the Crimes Act; "Injuring by unlawful act"

Every one is liable to imprisonment for a term not exceeding 3 years who injures any other person in such circumstances that if death had been caused he or she would have been guilty of manslaughter.

Sections 188 Wounding with intent, and; 189 Injuring with intent have application.

[34] There is ample evidence that governments and health authorities everywhere including New Zealand denied the efficacy of repurposed drugs and therapies which would have benefited Covid patients were they administered.

[35] A crime may be commissioned or an omission to perform a duty i.e. duty to care, public responsibility, fiscal responsibility, denial of treatment. Section 157 of the Crimes Act 1961 states;

Sec 157 Duty to avoid omissions dangerous to life

Every one who undertakes to do any act the omission to do which is or may be dangerous to life is under a legal duty to do that act, and is criminally responsible for the consequences of omitting without lawful excuse to discharge that duty.

[36] First crime is refusal to allow and or facilitate early treatment of Covid symptoms. Please reflect upon "in which other disease does NZ Health Authorities withhold treatment?"

[37] Second element of the act of criminality is the coercion and mandate to accept a proprietary product with no long term safety data, provisionally approved, and with a large kill rate and injury or harms to thousands of the participants.

[38] Additionally there is substantial testimony and evidence which establishes a pattern of doctors and medical officials downplaying the role of the Comirnaty Vaccination in the death or injury to the victim.

This is the case at the global level with peer reviewed publications suddenly withdrawing a peer reviewed science research paper which discloses the level of harm and injury resulting from Covid-19 Vaccinations. The following video makes clear what is being perpetrated. Bret Weinstein and Heather Heying (both PhDs in Biology) discuss the withdrawal of Jessica Rose and Peter A. McCullough's paper; "Report on Myocarditis Adverse Events in the U.S. Vaccine Adverse Events Reporting System (VAERS) in Association with COVID-19 Injectable Biological Products"

https://www.youtube.com/watch?v=4_kW7_9azxl

Pulled paper here:

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8483988/>

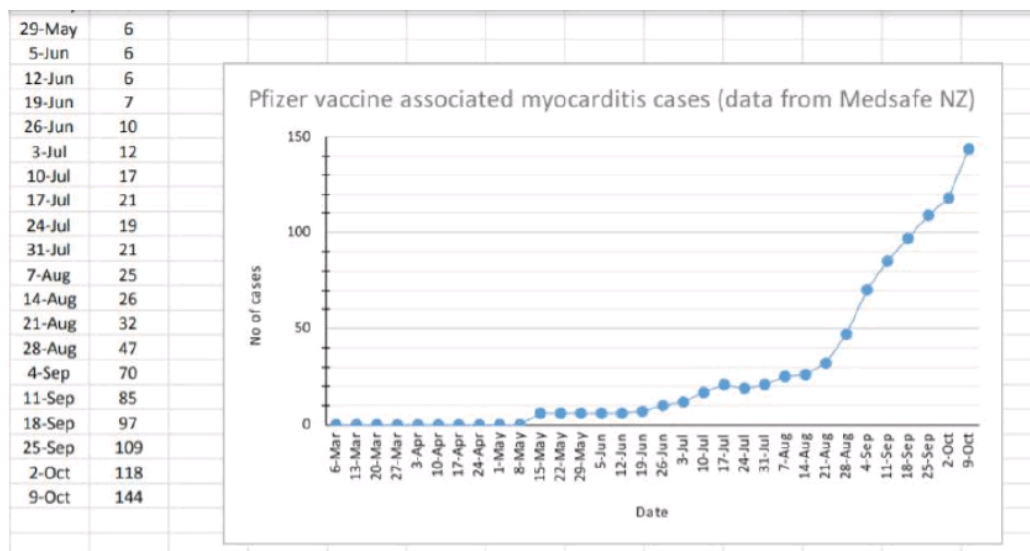
Webarchive copy of the published paper prior to being pulled by the publisher:

<https://web.archive.org/web/20211002192421/https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8483988/> Abstract;

Following the global rollout and administration of the Pfizer Inc./BioNTech BNT162b2 and Moderna mRNA-1273 vaccines on December 17, 2020, in the United States, and of the Janssen Ad26.COV2.S product on April 1st, 2021, in an unprecedented manner, hundreds of thousands of individuals have reported adverse events (AEs) using the Vaccine Adverse Events Reports System (VAERS). We used VAERS data to examine cardiac AEs, primarily myocarditis, reported following injection of the first or second dose of the COVID-19 injectable products. Myocarditis rates reported in VAERS were significantly higher in youths between the ages of 13 to 23 ($p < 0.0001$) with ~80% occurring in males. Within 8 weeks of the public offering of COVID-19 products to the 12-15-year-old age group, we found 19 times the expected number of myocarditis cases in the vaccination volunteers over background myocarditis rates for this age group. In addition, a 5-fold increase in myocarditis rate was observed subsequent to dose 2 as opposed to dose 1 in 15-year-old males. A total of 67% of all cases occurred with BNT162b2. Of the total myocarditis AE reports, 6 individuals died (1.1%) and of these, 2 were under 20 years of age - 1 was 13. These findings suggest a markedly higher risk for myocarditis subsequent to COVID-19 injectable product use than for other known vaccines, and this is well above known background rates for myocarditis. COVID-19 injectable products are novel and have a genetic, pathogenic mechanism of action causing uncontrolled expression of SARS-CoV-2 spike protein within human cells. When you combine this fact with the temporal relationship of AE occurrence and reporting, biological plausibility of cause and effect, and the fact that these data are internally and externally consistent with emerging sources of clinical data, it supports a conclusion that the COVID-19 biological products are deterministic for the myocarditis cases observed after injection.

The paper makes the case that severe myocarditis and death result directly from the Pfizer Comirnaty mRNA injection product.

The following graph (captured from a post by Naturopath Lynda Wharton) of myocarditis cases in New Zealand shows a very strong signal that the Pfizer Comirnaty mRNA injection product is toxic and causes severe disability.



[39] The NZ Medical Council is trying doctors who refuse to endorse or caution against acceptance of the Pfizer Comirnaty mRNA injection product.

<https://www.rnz.co.nz/news/national/445179/doctors-spreading-misinformation-about-covid-19-may-lose-their-job-medical-council>

A letter to the Medical Council from an individual in defence of Plimmerton doctor Matt Shelton who is under charges from the NZ Medical Council;

<https://nzdsos.com/wp-content/uploads/2021/09/210909-Christopher-Watson-to-MCNZ-re-Matt.pdf>

NZ Medical Council policy on informed consent to medical procedures updated and republished June 2021:

<https://www.mcnz.org.nz/assets/standards/c43a3affc3/Statement-on-informed-consent.pdf>

[40] A reasonable person could not suspect the New Zealand Government is ignorant of the carnage, harm and personal injury or homicide inflicted by their Covid Vaccination project.

[41] A reasonable person could not suspect the New Zealand Government is ignorant of the damage to society and political economy caused through their Covid Repsonse.

[42] Despite likely knowing of the carnage their acts are causing the NZ Government act as if blind to the destruction. Or worse the New Zealand Government do not care for the welfare of those afflicted as a result of Vaccination with Pfizer's Comirnaty mRNA injection product.

[43] The New Zealand Government must know more than I do about the deleterious effects of it's Vaccination program and the consequences of of it and the larger all of Government Covid response which has loaded the nation with a huge debt and diminished economy. Or is the willful blindness doctrine at work?

http://criminalnotebook.ca/index.php/Knowledge_and_Wilful_Blindness

To be clear the NZ Crimes Act 1961 states in Section 25 **Ignorance of law**

The fact that an offender is ignorant of the law is not an excuse for any offence committed by him or her.

[44] The human carnage caused by the Pfizer Comirnaty toxic mRNA gene therapy jab is a growing crime in commission.

[45] The mRNA turn's one's body into a S-spike producing machine making billions of the entity which cause one's immune system to kill the S-spike producing cells.

<https://www.raysahelian.com/index.html> US Doctor Ray Sahelian states;

I now have a clearer understanding of how these vaccines influence our immune system and organs, how they could be of benefit, and how they cause the multiple short, medium, and long term adverse effects.

I am convinced that the benefits promoted by experts on TV regarding these vaccines are less than what they promise, and the adverse reactions are more than they want us to believe. The effects of these vaccines on the human body are infinitely more complex than anyone can imagine... a million shades of gray, you

may say.

Comirnaty Data Sheet from Medsafe website does not indicate that Vaccination by Pfizer's Comirnaty mRNA injection product is safe or effective:

<https://medsafe.govt.nz/Profs/datasheet/c/comirnatyinj.pdf>

[46] The mRNA created S spike proteins might/will infect vascular cells in ones' vital organs; heart, brain, lungs, liver, kidneys.. anywhere as blood goes everywhere, apparently there are lots of spontaneous abortions amongst pregnant women soon after accepting Vaccination. The data sheet referenced in paragraph [45] above has this to say about Vaccinating pregnant women;

Pregnancy

There is limited experience with use of COMIRNATY in pregnant women. Animal studies do not indicate direct or indirect harmful effects with respect to pregnancy, embryo/fetal development, parturition or post-natal development (see Fertility). Administration of COMIRNATY in pregnancy should only be considered when the potential benefits outweigh any potential risks for the mother and fetus.

[47] Vaccine caused abortions are a wasteful unnecessary crime as pregnant women are of an age and likely fitness to ward off Covid-19 symptoms with ease particularly where early treatment is enabled.

[48] Lynda Wharton makes the point that there is minimal public reporting of vaccine adverse reaction or death, rather lots of official denial of the tragedy that people risk as they are coerced to accept the toxic Russian Roulette kill or maim shot. Paragraph [17] references a Newsroom article by journalist Marc Daalder; ***“Medsafe’s vaccine safety reports misused by anti-vaxxers”*** which appears to be advocating the removal of Vaccination adverse event reporting from the Medsafe website, which hints at a further denial of information necessary to properly and fully inform the public.

[49] My testimony and that of many others is that the mantra that the “vaccine is safe and effective” is not a factual representation of the Pfizer Comirnaty mRNA injection product.

Where an authority misrepresents information and actively denies important data such as the true level of adverse events and deaths from Vaccination, the public are being deceived. Section 240 of the Crimes Act; “Obtaining by deception or causing loss by

deception” might apply particularly where it states;

(2) In this section, deception means—

(a) a false representation, whether oral, documentary, or by conduct, where the person making the representation intends to deceive any other person and—

(i) knows that it is false in a material particular; or

(ii) is reckless as to whether it is false in a material particular; or

(b) an omission to disclose a material particular, with intent to deceive any person, in circumstances where there is a duty to disclose it; or

(c) a fraudulent device, trick, or stratagem used with intent to deceive any person.

[50] Given the deception by the Government and its allies appears to be to sell a particular commercial product, it is reprehensible to falsely advertise its merits.

[51] I assert people with just a headache or similar localised discomfort in association with being Vaccinated are likely to have suffered damage to their tissues in those regions of their body. Damage may not present as an injury until much later in one's life. Science is still researching the long term effects of injecting people with mRNA gene therapy products.

[52] How can a society arrive at reasonable conclusions when key data and information enabling the making of a sound conclusion is deliberately withheld by Government, MSM news media and Non Government Organisations such as the NZ Medical Council or DHBs.

[53] Truth is one answer to the Big Lie.

https://en.wikipedia.org/wiki/Big_lie#U.S._psychological_profile_of_Hitler extract is self explanatory;

The phrase "big lie" was also used in a report prepared during the war by the United States Office of Strategic Services in describing Hitler's psychological profile:

His primary rules were: never allow the public to cool off; never admit a fault or wrong; never concede that there may be some good in your enemy; never leave room for alternatives; never accept blame; concentrate on one enemy at a time and blame him for everything that goes wrong; people will believe a big lie sooner than a little one; and if you repeat it frequently enough people will sooner or later believe

it.

[54] NZ Police must investigate whether accusations in this Notice constitute crime. The Policing Act of 2008 establishes the legislative framework from which NZ Police obtain their power to act. Below the link are Sections 8 and 9 of the Act outlined in full:

<https://www.legislation.govt.nz/act/public/2008/0072/latest/whole.html#DLM1102125>

Part 2 Organisation and governance

Subpart 1—New Zealand Police, principles, functions, and roles of others

Sec 8 Principles

This Act is based on the following principles:

- (a) principled, effective, and efficient policing services are a cornerstone of a free and democratic society under the rule of law:*
- (b) effective policing relies on a wide measure of public support and confidence:*
- (c) policing services are provided under a national framework but also have a local community focus:*
- (d) policing services are provided in a manner that respects human rights:*
- (e) policing services are provided independently and impartially:*
- (f) in providing policing services every Police employee is required to act professionally, ethically, and with integrity.*

Sec 9 Functions of Police

The functions of the Police include—

- (a) keeping the peace:*
- (b) maintaining public safety:*
- (c) law enforcement:*
- (d) crime prevention:*
- (e) community support and reassurance:*

(f) national security:

(g) participation in policing activities outside New Zealand:

(h) emergency management.

These are the key principles and functions of the NZ Police institution. The remainder of the act is organisational.

A key principle is; "policing services are provided independently and impartially" and key functions are; "maintaining public safety, law enforcement and crime prevention."

In properly investigating this Police Report and doing it justice, the NZ Police will be upholding the Law that governs the NZ Police institution and New Zealand.

[55] For context please read this letter by Mounties for Freedom published 21 October 2021.

Royal Canadian Mounted Police (RCMP) membership is torn over Vaccine mandates and other Covid measure they have been directed to enforce against the Canadian public. Mounties penned this eloquent letter to their Police Commissioner over the matter of what is lawful and that which is not Law.

According to these investigators and police officers from all levels of the RCMP Covid mandates are unlawful and criminal assault in respect to Covid Vaccine mandates.

<https://mounties4freedom.ca/>

Canadian Prime Minister Trudeau is mandating Covid Vaccination to all Federal public officials including the Mounties.

Mounties for Freedom representative Corporal Daniel Bulford, an officer in the RCMP speaks with journalist Kean Bexte over Trudeau's "first step" to tame the national police force and what his plans are for the rest of the population. Corporal Bulford was on Prime Minister Trudeau's sniper team to secure him when in public.

<https://superu.net/video/5d7b1847-e1d9-483b-8266-5b7cd084fedf/>

[56] NZ Government is now considering a Vaccine mandate Order for the NZ Police.

<https://www.stuff.co.nz/national/politics/300439764/covid19-nz-government-considering-vaccine-mandate-for-police>

Is a NZ Police force made up of only those officers that accept the Covid Vaccination a beneficial or desirable outcome? NZ Police officers who prefer not to be Vaccinated will suffer the same fate as those who also refuse the mandates to maintain their employment. Potentially many are also "contentious objectors" to the Covid Vaccination mandate.

"First they came" poem by Martin Niemöller in the aftermath of Nazi Germany extermination of minorities and others;

First they came for the Communists

And I did not speak out

Because I was not a Communist

Then they came for the Socialists

And I did not speak out

Because I was not a Socialist

Then they came for the trade unionists

And I did not speak out

Because I was not a trade unionist

Then they came for the Jews

And I did not speak out

Because I was not a Jew

Then they came for me

And there was no one left

To speak out for me.

https://www.amnesty.org.uk/files/2019-01/First%20They%20Came%20by%20Martin%20Niem%C3%B6ller_0.pdf

[57] Whom is organising this diminishment and cull of the human species? Please report your findings in a public manner.

In closing..

[58] The mantra is “get Vaccinated to get your freedoms back.”

At which point were my freedoms discontinued?

Why is my freedom now conditional upon being Vaccinated?

[59] Why am I to suffer the RISK of damage, harm and injury or death from the Vaccine to satisfy an arbitrary, unlawful and nonsense mandate to participate in society – what freedom is there in that status.

Thus if I submit to be Vaccinated I would surrender to assault upon my person, and in the case of death from Vaccine harm, I would be coerced to my own death.

That is a terrible thing to ask of any human by a caring government - that one consents to self harm.

[60] I've written previously to the New Zealand Parliament Representatives and Government Ministers in respect to the Covid matter which outlines my discoveries and comprehension of the issue, including;

the origins of the SARS-CoV-2 virus – man made chimera,

its release from a laboratory – likely purposeful especially when one considers the lockstep response across the Western nations,

the low level of lethality or morbidity of the viral infection – similar to seasonal influenza or outbreak of cold illnesses in care facilities for elderly and infirm,

the inappropriate use of PCR tests as a means of diagnosing Covid cases,

the politicisation, withholding or banning of early treatment and cures

the lockdowns did little to prevent infection and much to damage society and its fabric,

the lockdowns were an economic intervention that transformed and redirected commerce and financial flows to large corporations the result being small and medium enterprises taking a big hit - over 9000 business closures in Auckland in August 2021. Economic impoverishment is the result.

[61] Not only I but many individuals, organisations and business owners have brought similar or parallel information to the NZ Government through its many processes and

agencies. As such the institution of NZ Parliament nor the NZ Government can claim ignorance of the matters I have drawn to their attention in relation to the Covid matter.

[62] Despite the early utterance by NZ Government ministers; “there will be no Vaccine mandates,” the NZ Government is issuing more Vaccine Mandate Orders which in my view make them undeniably culpable of homicide (murder/manslaughter) where a person Vaccinated dies as a result of the mandated procedure.

August 2020 the NZ PM Jacinda Ardern is quoted by the national broadcaster stating that Vaccination mandates will not be required in New Zealand. What has changed since then?

<https://www.1news.co.nz/2020/08/19/mandatory-covid-19-vaccine-nz-and-australias-different-approaches/>

It would be a credulous fool that took anything the NZ Government said about Covid or Vaccinations at face value.

Prior evidence papers to NZ Government on Covid phenomena

[63] February 2021 paper to the NZ Parliament Foreign Affairs Defence and Trade select committee RCEP treaty examination which addresses the Covid matter; origins, planning, government response, politicisation of treatments and initial concerns with the safety or efficacy of the Covid Vaccines:

https://www.parliament.nz/resource/en-NZ/53SCFD_EVI_104189_FD177/e80f0867c2b32ac39bbb06b499116c630d2f679b

[64] My paper to the Health select committee of the NZ Parliament in respect to the COVID-19 Public Health Response Amendment Bill (No 2) contains much which updates the above paper in respect to RCEP and Covid:

<https://values-compasspointsinaposttruthworld.blogspot.com/2021/10/gregs-evidence-to-health-committee-re.html> which includes the following observations about the lethality of Covid-19;

Dr Ioannidis most recent paper (version July 2021) on the Covid-19 distemper's lethality places the overall infection fatality rate at 0.15% which is extremely age stratified and afflicts those already immune compromised and or with comorbidities.

“Infection fatality rate of COVID-19 in community-dwelling populations with emphasis on the elderly: An overview”

<https://www.medrxiv.org/content/10.1101/2021.07.08.21260210v1.full.pdf>

A summary of the findings here;

<https://lostworldoutpost.com/stanford-study-on-covid-infection-mortality-rates/>

A study by Cathrine Axfors and John P.A. Ioannidis from the Departments of Medicine, of Epidemiology and Population Health, of Biomedical Data Science, and of Statistics, Stanford University.

In short here is the take-away data:

Age Infection Survival Rate of COVID.

0-19	99.9973%
20-29	99.986%
30-39	99.969%
40-49	99.918%
50-59	99.73%
60-69	99.41%
70+	97.6% (non-inst.)
70+	94.5% (all)

This hardly looks like a pandemic.

[65] Where accusations or allegations of serious Crime under the Crimes Act are brought to the attention of NZ Police backed by credible evidence and testimony it is reason and justification to act by fully investigating the accusations, particularly in respect to the potential murder of hundreds of New Zealanders.

In sentencing the Christchurch Mosque attacker Justice Cameron Mander outlines his reasoning and thoughts; “Sentencing purposes” from paragraph [124] of his decision:

<https://www.courtsofnz.govt.nz/assets/cases/R-v-Tarrant-sentencing-remarks-20200827.pdf>

Justice Mander's remarks could equally apply to the New Zealand Government Executive (Cabinet of Ministers) who cause such terrific carnage; death and injury to New Zealanders;

[124] Mr Tarrant, in sentencing you my prime objectives are threefold. First and foremost, to condemn your crimes and to denounce your actions. Second, to hold you accountable for the terrible harm you have caused — in plain terms, to attempt to impose some commensurate punishment. I do that on behalf of the whole community, which in particular includes the victims of your crimes and their families, all of whom are a part of New Zealand's multicultural society. Third, there is the need to protect the community from a person capable of committing cold-blooded murder on such a scale and who presents such a grave risk to public safety.

[125] A predominant feature of your offending is that your homicidal actions constituted an act of terrorism and that your victims were targeted predominantly because of their religion but also their ethnicity, their race and their colour. I am required to impose a sentence that appropriately takes into account and reflects those particular aggravating features of your crimes and the distorted motivations that lay behind them.

In the case of the Christchurch Terrorist Attack the victims were in two locations at the Deans Ave and Linwood Rd Mosques.

In the matter I bring to your attention, the Covid Vaccination victims killed and injured are scattered across the nation.

The Christchurch terror attack appears more gruesome and traumatic because of the immediacy and suddenness of the strike, whereas in truth the carnage, suffering and injury from the NZ Government's Pfizer Comirnaty mRNA injection product program is a far greater harm in terms of the harm caused and continuing.

The Covid Vaccination carnage is ongoing, growing and there's strong signals already despite the lack of long term safety data that further deleterious effects will become apparent with the elapse of time. Any potential mandating of booster Vaccinations or other mRNA gene therapy injection products yet to be marketed to the public will exacerbate the harm.

I urge NZ Police to immediately commence an investigation into the homicide by Covid-19 Vaccination of New Zealanders where it is not already initiated. Where it is already under investigation please add my Police Report to the material under consideration.

In truth and honour

Greg Rzesniowiecki

Contact details supplied

Appendix A

File AE-redacted-211017 is an anonymised spread sheet of adverse events and deaths gathered privately through Lynda Wharton's facebook page and or private reports. It lists 1000 adverse events or deaths.

It cannot be the total of adverse events attributable to the Pfizer Comirnaty mRNA injection product.

Appendix B

Deaths Citizens Database revised is a collection of 230 reports of death post Vaccination. As the name infers it is a private undertaking. Reports are direct from family, anecdotal testimony from associates, and reports discovered on social media and subsequently confirmed that the deceased had recently been Vaccinated.

Likewise with Appendix A the Citizens Database cannot contain all potential deaths resulting from Vaccination. A real potential is that this represents the tip of a large iceberg.

Attachment 1 from paragraph [17]

<https://www.facebook.com/groups/thehealthforumnz/posts/473272630439832/>

Lynda Wharton

1 October 2021

THE RAT I HAVE BEEN SMELLING HAS NOW TURNED INTO A STINK BOMB...

Newshub.

What the hell is up with Newshub?

I have never in my life seen a media outlet more committed to "gaslighting" anyone who so much as squeaks the possibility of a CV V injury.

Following the Prime Ministers nuclear explosion of a post asking for people to talk about their "side effects"....

Newshub published the most awful article implying that every one of those injured or grieving New Zealanders were bonkers, tin foil hat wearing liars.

It was a new LOW for New Zealand media.

I've just finished reading another of their journalistic masterpieces driving longer nails into this particular coffin...just in case by any chance, a single New Zealander (besides the injured) believed there could possibly be more than a sore arm from this "safe and effective" jab.

I decided to go for a google roam, to see if i could finally work out exactly what the motivation is for these heinous hit pieces.

Boy did i find my answers.

Here is my trail....

you may like to meander this path and check my findings out for yourself.

In December 2020 Newshub NZ was purchased by DISCOVERY CHANNEL (an American company).

Five months later in May 2021 Discovery merged with Warner, to create a mega mega media company.

Who owns this new behemoth?

A company called AT and T own 71% and Discovery own 29%.

So who are the top shareholders in AT and T?

Vanguard and Blackrock.

Who are the top shareholders in Vanguard?

Blackrock

Who are the top shareholders in Blackrock?

Vanguard

WHO ARE THE TOP SHAREHOLDERS OF PFIZER.....

BLACKROCK

AND

VANGUARD

If you don't believe me, just follow the same google trail.

Here is the link to the last part of my journey

So here on the backside of the world, where thousands of CV V hurting Kiwi's are being dismissed by our largest News organisation.....

What more can i say....

COMMENTING DISABLED AS IT WILL BE A BUN FIGHT.

POST FOR YOUR INFORMATION ONLY

<https://money.cnn.com/quote/shareholders/shareholders.html?symb=PFE&subView=institutional>

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**Organisation:**

Turangi--Tongariro Community Board

First name: Clint**Last name:** Green**Age:****Gender:****Ethnicity:****HEARING: Let us know if you wish to speak at a hearing and your preferred location. ***

I do NOT wish to speak in support of my submission and ask that the following submission be fully considered.

Feedback

Do you have any other feedback?

Refer to full submission attached

The Tūrangi-Tongariro Community Board supports the Annual Plan projects and in addition strongly submits that the extra expenditure required for the playground project be made available through the annual plan.

Attached Documents

File
PDF - TTCB Annual Plan Submission

**Submission to the Taupō District Council's Annual
Plan 2022-2023
By Tūrangi-Tongariro Community Board**

To: Taupo District Council
Private Bag 2005
Taupo 3352
info@taupo.govt.nz

1.0 SUMMARY

Council's Annual Plan outlines the services, key projects, and initiatives Council intends delivering for our community in the coming financial year. The Annual Plan consultation document sets out some key projects/proposals which have changed since the adoption of the Long-term Plan.

The Annual Plan includes five key projects:

- Changes to the capital expenditure programme.
- Aligning the local water schemes.
- Updates to some of Council's fees and charges.
- Significance and engagement policy.
- Towncentre Taupō management rate.

Scope of activity

1. Providing local input into the development of Council policy that will impact on the Tūrangi-Tongariro ward.
2. Maintaining an overview of service delivery, operational and capital expenditure, within the Tūrangi-Tongariro ward. Providing local input into the development and review of Council's key planning documents such as the Long-term Plan, Asset Management Plans, Structure Plans, Reserve Management Plans and the annual plan
3. Preparing an annual submission to Council's budgetary process for expenditure within the community
4. Considering and reporting on all matters referred to it by Council or any matter of interest or concern to the ward.
5. Communicating with the Tūrangi community, community organisations and special interest groups within the Tūrangi-Tongariro ward.
6. Exercising Council's statutory regulatory functions under the following Acts and Regulations (and any amendments) that are not elsewhere delegated to staff and that relate to matters in the Tūrangi-Tongariro ward:
 - Local Government Act 1974 – Part 21
 - Land Transport Act 1998
 - Reserves Act 1977
 - Local Government Act 1974 – Section 319 - Road Naming
7. Considering resident and ratepayer appeals to decisions made in accordance with Council's Tree and Vegetation Policy affecting trees and vegetation in the Tūrangi-Tongariro ward.

2.0 NEW TURANGI PLAYGROUND

Approval of excess expenditure to allow construction within the Annual Plan

CONCLUSION

The Tūrangi-Tongariro Community Board supports the Annual Plan projects and in addition strongly submits that the extra expenditure required for the playground project be made available through the annual plan.

Thank you for the opportunity to make this submission.

DATED April 12th 2022

C A Green (TTCB Chair) on behalf of Tūrangi-Tongariro Community Board

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**Organisation:**

New Zealand Chinese Language Week

First name: Jo**Last name:** Coughlan**Age:****Gender:****Ethnicity:****HEARING:** Let us know if you wish to speak at a hearing and your preferred location. *

I do NOT wish to speak in support of my submission and ask that the following submission be fully considered.

Feedback

Do you have any other feedback?

Refer to the attached document

seeking your support for the 2022 New Zealand Chinese Language Week (NZCLW).

Attached Documents

File
PDF - Annual Plan Submission - NZCLW

NEW ZEALAND CHINESE LANGUAGE WEEK 2022



你好 Nǐ hǎo

New Zealand Chinese Language Week 新西兰中文周 2022

It's now less than six months to go until New Zealand Chinese Language Week 2022 kicks off and we're excited to outline plans for new initiatives and activities to celebrate this year.

The New Zealand Chinese Language Week (NZCLW) is being held 25 September to 1 October 2022. We want to involve people from all around the country, so this means we are asking the Council for three things:

- Someone who can be the liaison person for us to contact about activities in your area district
- A Mayoral video of support to be featured during the NZCLW week
- And a chance to present to your council's Annual Plan 2022/23 for a contribution to the week's activities in your area and events of \$2,000.

The New Zealand Chinese Language Week Charitable Trust is a New Zealand-driven initiative set up in 2014 to encourage the learning of Chinese language in New Zealand.

Our aim is to strengthen communities through inclusion and embracing diversity. What better way is there to understand another culture than through language?

A large part of the Trust's work is to recognise and celebrate the diversity of the community in New Zealand – Chinese people have been part of Aotearoa New Zealand's story for 180 years and have many important stories to tell. This is even more important now, with the new school curriculum focusing on local history within our country.



www.nzclw.com | Email: nzclw@nzclw.com

#NZCLW  

NEW ZEALAND CHINESE LANGUAGE WEEK 50 22



This year's New Zealand Chinese Language Week's theme is "Sharing our Stories", and we hope to hear a lot of the stories that make our community diverse and vibrant.

A large part of the Trust's work is to recognise and celebrate the diversity of the community in New Zealand – Chinese people have been part of Aotearoa New Zealand's story for 180 years and have many important stories to tell. This is even more important now, with the new school curriculum focusing on local history within our country.

This year's New Zealand Chinese Language Week's theme is "Sharing our Stories", and we hope to hear a lot of the stories that make our community diverse and vibrant.

As in previous years, we expect a lot of events to involve celebrations with food and drink and hospitality – all features of Chinese and New Zealand Māori and European cultures.

The Trust is committed to providing resources to enable different groups to share common experiences, and one of the ways we demonstrate this is by each year publishing a children's book in three languages – Mandarin Chinese (characters and pīn yīn), English, and te reo Māori.

The feedback we get on this book – which is distributed free to schools and public libraries – is unanimous about its value. Librarians and teachers around New Zealand tell us that readers, particularly children, love seeing themselves, their families, and their language in the books.

Your own library may well have been part of previous years' events and activities around New Zealand Chinese Language Week.

We want to ensure that more communities around New Zealand have the opportunity to take part in New Zealand Chinese Language Week, so we would like to have someone from your council be the contact point for us to share resources to enable your community to be involved. This may be someone on your public library staff, or a community development staffer.



www.nzclw.com | Email: nzclw@nzclw.com

#NZCLW



NEW ZEALAND CHINESE LANGUAGE WEEK 2022



Many communities around New Zealand have significant social, cultural, educational, and other links with China and Chinese people in their districts. New Zealand Chinese Language Week is an excellent opportunity to celebrate those.

We would also like to get a video of support to be featured during the NZCLW week from yourself as Mayor.

Your video plays an important part in the week. It shows a commitment to being a welcoming, open society that embraces all the many cultures that make up our society. Participants in NZCLW have been impressed and heartened by the depth and breadth of the support from local government during previous weeks.

Finally, we at NZCLW Trust would welcome the opportunity to submit to your council's Annual Plan Submission 2022/2023. We wish to apply for a \$2,000 grant to fund activities for New Zealand Chinese Language Week in your region and would like to appear in person to support this application.

Thank you for your consideration. We look forward to hearing how your council will celebrate New Zealand Chinese Language Week 2022 from September 25 to 1 October.

For more information, please don't hesitate to visit the NZCLW website: www.nzclw.com or email our Project Team at nzclw@nzclw.com

Many thanks and kindest regards

Jo Coughlan | Chair of New Zealand Chinese Language Week



www.nzclw.com | Email: nzclw@nzclw.com

#NZCLW



51



Organisation:

Taupo East Rural Representative Group

First name: Patrick

Last name: Hart

Age:

Gender:

Ethnicity:

HEARING: Let us know if you wish to speak at a hearing and your preferred location. *

I do NOT wish to speak in support of my submission and ask that the following submission be fully considered.

Feedback

Do you have any other feedback?

- Refer to the attached document

Attached Documents

File
PDF - Annual Plan Submission - Taupo East Rural Representative Group

Submission to the Annual Plan 2022-23
By Taupō East Rural Representative Group

To: Taupo District Council
Private Bag 2005
Taupo 3352
info@taupo.govt.nz

1.0 SUMMARY

Taupo District Council is seeking feedback on the proposed Annual Plan 2022-23 – Shaping our Future.

The Taupo East Rural Representative Group (TERG) exist to represent the Taupo East Ward on the following areas of activity:

Scope of activity

1. Providing local input into the development of Council policy that will impact on the Taupō East Rural ward.
2. Maintaining an overview of service delivery, operational and capital expenditure, within the TER ward. Providing local input into the development and review of Council's key planning documents such as the Long-term Plan, Asset Management Plans, Structure Plans, Reserve Management Plans and the annual plan
3. Preparing an annual submission to Council's budgetary process for expenditure within the community
4. Considering and reporting on all matters referred to it by Council or any matter of interest or concern to the ward.
5. Communicating with the rural community, community organisations and special interest groups within the TER ward.

The following points have been noted in the proposed Annual Plan 21-23 that resonate with the TERG and its community.

- Representation Review outcome acknowledgement
- Proposed Taupo East Community Grant
- Rural Road Funding
- Strategy participation

2.0 REPRESENTATION REVIEW

The Taupō East Representative Group would like to acknowledge the outcomes of the recent representation review. It was pleasing to see that the council and Local Government Commission value the role of the Taupō East Rural ward and the support that this group provides by being an important voice for the rural parts of the district.

We note that this approach to rural representation is now being recommended to other councils. Thank you for having the foresight to establish this group, although still in its infancy, there is a positive future ahead. The committee would also like to acknowledge the support and commitment from council staff who assist to make this group effective.

3.0 TAUPŌ EAST COMMUNITY GRANT

The Taupō East Rural Representative Group would like to extend its appreciation and support for the proposed Taupo East Rural Grant. This is seen as a positive step to support and grow initiatives within the Taupo East Ward whilst enabling TERG, those at the heart of the community to be a part of the processes.

4.0 RURAL ROAD FUNDING

The Taupō East Representative Group agree with the proposed projects to improve roads across the Rural areas outlined in the Annual Plan. However, do not support the Taupo District and its community having to provide this additional funding, instead there should be greater push back to Waka Kotahi (NZ Transport Agency) to fund these improvements as part of their national program.

The below factors are the reasons for the group's strong stance on this from the rural community.

The Taupō East Rural Representative Group would like to see more resources put into improving the quality of rural roads. The rural community pay a lot in taxes, rates and road users charges, they don't always see that coming through in the quality of roads they have to drive on every day.

Would like to see a better system for prioritizing roads that need improving. If the community can help feedback on parts or rural roads that could be prioritized for upgrades over others this would be of benefit.

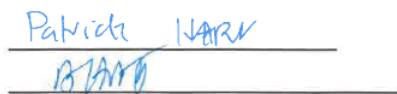
Problem solving and thinking outside the box can also be of benefit to fixing roading problems. More engagement with rural communities and businesses may be able to find innovative solutions to high-risk areas on roads. This approach has yet to be explored.

4.0 STRATEGY PARTICIPATION

The Taupō East Rural Representative Group would like to highlight their ongoing interest to participate in various council policies and strategies such as the District Plan review, climate change and housing strategy. Particularly contributing the rural sector perspective and its linkages to the economic benefits it provides in terms of business (Dairy Farming, horticulture, etc..) to the district, along with the impacts and opportunities around development and housing – papakainga, lifestyle blocks and the urban spread into rural land.

Thank you for the opportunity to make this submission.

DATED 12 April 2022



Taupō East Representative Group

52



First name: Scott

Last name: Necklen

Age:

Gender:

Ethnicity:

HEARING: Let us know if you wish to speak at a hearing and your preferred location. *

I do NOT wish to speak in support of my submission and ask that the following submission be fully considered.

Feedback

Council has highlighted a number of proposed changes to some of its key projects, please let us know if you agree with these changes.

You can read about changes to our capital expenditure programme [HERE](#)

Water projects - Do you agree with these changes?

Do you have any comment to share with us?

My wife and I own a property on Motuoapa Esplanade and we are very supportive of the proposal to extend the water network from a health and economic perspective.

Health

Many of the properties located on the Esplanade either collect rain water and/or have access to bore water supply, however both are unreliable in terms of supply and quality.

While we have a filter system attached to our rain water tank it is unreliable due to power cuts and we often taste ash from our tap water which has been collected from the roof in winter from peoples' fires, this also leads us to believe that other impurities are also present in our tap water.

There is anecdotal evidence of family and guests suffering from low grade stomach upsets following the consumption of the tank supply which raises questions of possible contamination from bird faeces etc.

I struggle to see how the current supply will meet the new compliance levels.

Economic

Due to the low rainfall of the Motuoapa micro-climate and the inefficiency of roof collection we are forced to truck in water supply from Taupo which comes at a cost. I am supportive of the proposed targeted rate on the Motuoapa water properties to extend the water supply as this would be cheaper than our current costs while improving continuity of supply.

I imagine the water extension would have a much greater positive impact on the camping ground who I believe are also forced to truck in water.

T24Consult Page 1 of 2

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The extension to the water supply would lead to a reduced number of water trucks on the Taupo to Motuoapa road resulting in reduced wear/tear on the road and reduced carbon emissions.

At this time we can also experience considerable water loss when the power supply is interrupted and the electronic controller attached to the water filter resets the controller to purge, regenerate and/or backwash resulting in water being pumped out of the emergency overflow pipe and lost into the ground and wasted.

Do you have any other feedback?

Please see the attached full submission

Attached Documents

File
PDF - Annual Plan Submission - Scott Necklen

Nikki Donaldson

From: TDC Info Email Queue
Sent: Thursday, 28 April 2022 1:52 PM
To: Annual Plan
Subject: Fwd: Fw: Special Edition: Annual Plan 2022-23 - We want your feedback 📧
Categories: Nikki, Late

Kia Ora,

Please see the below and attached for further information.

Nāku ngā mihi, nā

Marissa Davidson Customer Support
Taupō District Council • 30 Tongariro Street, Taupō 3330
Private Bag 2005 • Taupō Mail Centre • Taupō 3352 • New Zealand
T +64 7 376 0899 • E info@taupo.govt.nz
Follow us on [Facebook](#) and [Twitter](#)
www.taupo.govt.nz

From: scott.necklen@hotmail.co.uk
Sent: Thursday, April 28, 2022 1:25 PM
To: info@taupo.govt.nz
Subject: Re: Fw: Special Edition: Annual Plan 2022-23 - We want your feedback 📧

Kia ora Marissa,

Thanks so much for your help and assistance in providing a submission on the Motuoapa water extension. I welcome the opportunity to be consulted and provide a view point.

My wife and I own a property on Motuoapa Esplanade and we are very supportive of the proposal to extend the water network from a health and economic perspective.

Health

Many of the properties located on the Esplanade either collect rain water and/or have access to bore water supply, however both are unreliable in terms of supply and quality.

While we have a filter system attached to our rain water tank it is unreliable due to power cuts and we often taste ash from our tap water which has been collected from the roof in winter from peoples' fires, this also leads us to believe that other impurities are also present in our tap water.

There is anecdotal evidence of family and guests suffering from low grade stomach upsets following the consumption of the tank supply which raises questions of possible contamination from bird faeces etc.

I struggle to see how the current supply will meet the new compliance levels.

Economic

52

Due to the low rainfall of the Motuoapa micro-climate and the inefficiency of roof collection we are forced to truck in water supply from Taupo which comes at a cost. I am supportive of the proposed targeted rate on the Motuoapa water properties to extend the water supply as this would be cheaper than our current costs while improving continuity of supply.

I imagine the water extension would have a much greater positive impact on the camping ground who I believe are also forced to truck in water.


The extension to the water supply would lead to a reduced number of water trucks on the Taupo to Motuoapa road resulting in reduced wear/tear on the road and reduced carbon emissions.

At this time we can also experience considerable water loss when the power supply is interrupted and the electronic controller attached to the water filter resets the controller to purge, regenerate and/or backwash resulting in water being pumped out of the emergency overflow pipe and lost into the ground and wasted.

Thanks again for the opportunity to provide feedback. We are very supportive. I am also aware from a recent gathering that the majority of property owners along the Esplanade are supporting - this was a major topic of conversation, although I respect that I can't talk on their behalf.

Kind regards,
Scott

Scott Necklen
029 924 1210

From: Taupo District Council <info@taupo.govt.nz>
Sent: Tuesday, 19 April 2022 2:59 pm
To: Scott Necklen <scott.necklen@hotmail.co.uk>
Subject: Re: Fw: Special Edition: Annual Plan 2022-23 - We want your feedback 

Kia ora,

Thank you for your email.


Yes you are able to make your submission via email. Please feel free to email your submission in response to this reply and I will pass it on to the team for you.

Please let me know if I can help you with anything else.

Nga mihi,

Marissa

Marissa Davidson Customer Support
Taupō District Council • 30 Tongariro Street, Taupō 3330
Private Bag 2005 • Taupō Mail Centre • Taupō 3352 • New Zealand
T +64 7 376 0899 • E info@taupo.govt.nz
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www.taupo.govt.nz


From: scott.necklen@hotmail.co.uk
Sent: Tuesday, April 19, 2022 10:31 AM
To: info@taupo.govt.nz
Subject: Fw: Special Edition: Annual Plan 2022-23 - We want your feedback 
Kia ora,

Thanks for your email updates. I find them really useful.

I see Consultation is underway for the Annual Plan. I would like to express my support for the Motuoapa extension of water network.

However I can't make a drop in meeting. Is it possible please to email my submission/ support?

Thanks,
Scott

Scott Necklen
029 924 1210
From: Taupō District Council <connect@taupo.govt.nz>
Sent: Friday, 25 March 2022 2:03 pm
To: scott.necklen@hotmail.co.uk <scott.necklen@hotmail.co.uk>
Subject: Special Edition: Annual Plan 2022-23 - We want your feedback 

[View this email in your browser](#)



It's Annual Plan consultation time - and we're asking you to help us shape the Taupō District Council's plans and priorities for the next 12 months.

Every three years the council sets a Long-term Plan which outlines what projects and services the district can expect council to deliver in the next 10 years, and how they will be paid for.

In the years in between, we prepare an Annual Plan, which compares progress against what was forecast in the Long-term Plan and allows us to make changes if needed.

This year, when we sat down to look at our Annual Plan, it soon became evident that the effects of Covid-19 on the supply chain, the rising cost of carbon units and the jump in inflation meant that the affordability of some of our projects was no longer in line with what was forecast.

So, we've gone back to the drawing board and looked at our projects again in close detail to determine what is already underway and must continue, what can still go ahead and what could be deferred until the economic situation is more certain.

We're looking to reprioritise some of our projects and activities to later years, while focusing on delivering the ones already underway,

Now we're asking our community if they think we've got these right. Have a look through the information below, read our Annual Plan 2022-23 Consultation Document [here](#) and let us know your thoughts. Submissions are open until 4.30pm on Thursday 14 April.

You can find out more, including what's planned for your local community, at taupo.govt.nz/haveyoursay.

The major changes we are proposing are detailed in the sections below.



Taupō Town Centre Transformation Project

This is a government-funded \$20.6 million, two-year project which has been gradually transforming our town centre from a CBD bounded on two sides by busy arterial roads, to a destination shopping area connected to the Tongariro Domain, Taupō Boat Harbour and Lake Taupō. To achieve this, through traffic is now being routed along Tītiraupenga Street, around the side of the CBD.

The last stage of the project is the revamp of the Roberts Street and Lake Terrace area between Tongariro Street and Ruapehu Street to turn it into a pedestrian-friendly, people-centred dining and recreation space. This is a once-in-a-lifetime opportunity to create a world-class waterfront for our district and create a landmark town centre destination

which will encourage people to linger and spend money in our businesses. We are proposing a \$4.4 million top-up so that we can achieve the full aims of this project.

Significant upgrades for water infrastructure

Clean, safe drinking water is fundamental to human health. We currently have several projects underway to supply communities in our district with water that meets Drinking Water Standards New Zealand. The cost to complete these will be higher than anticipated.

Regardless of what happens to our water infrastructure in the future, we are committed to providing safe drinking water for all our communities.

Transport upgrades

We work with Waikato Regional Council and Waka Kotahi New Zealand Transport Agency on road safety and road improvements. There are several important council-owned roads that need low-cost widening work that Waka Kotahi hasn't funded as planned. These costs will now need to be met by council.

Civic Administration Building fit-out

This building is a landmark partnership between Taupō District Council and Te Whare Hono o Tūwharetoa Limited Partnership. Te Whare Hono will construct a building and the council will lease part of it. The fit-out is now scheduled to begin earlier than planned so has been brought forward into the 2022-23 Annual Plan. The rise in construction costs also means the fitout cost has increased by \$2.5 million.



We're aligning all our water schemes to be funded district-wide rather than by individual communities.

At present, Five Mile Bay ratepayers pay a targeted water rate, which we are proposing to remove so that all water schemes are rated consistently. The impact of this will be 50 cents per ratepayer, per year.



The majority of our fees and charges were set for three years as part of the Long-term Plan process and remain largely unchanged. However in a small number of cases we are proposing some changes to those set fees.

Some venue hire charges have increased. Solid waste refuse disposal charges will also increase, from \$140 per tonne to \$170 per tonne to cover increasing government costs and regulations.

You can review a summary of the main proposed changes to fees and charges

[here](#).



Towncentre Taupō's activities in promoting the Taupō CBD are funded by a targeted rate paid by businesses in the CBD.

Towncentre Taupō is requesting an additional \$8253 over its forecast budget. This equates to an increase of \$19 (including GST) in the rate paid by each eligible business.



Our Significance and Engagement Policy helps guide when we should consult with the community on decisions and issues.

We're proposing changes that we hope will simplify the policy and in turn, our decisions on community engagement.



Reprioritising our projects means we have kept our projected capital spend in line with our Long-term Plan. We also remain committed to keeping within our projected operating expenditure.

Our Long-term Plan projected a 7.35 percent average rates increase in the 2022-23 year. This is now projected to increase by another 1 percent, primarily due to a jump in the cost of carbon units, which have more than doubled in the last 12 months.



Your feedback is important to us. The consultation period runs until 4.30pm on Thursday 14 April.

Please visit

taupo.govt.nz/haveyoursay to make a submission.

You can also read our Annual Plan consultation document online

[here](#)

or pick up a copy from one of our Taupō District Council customer service centres in Taupō, Tūrangi or Mangakino.

We would also love to see you at one of our public drop-in sessions. These sessions give you the opportunity to have a korero with our team, including elected members, around the services, key projects and initiatives we intend delivering for the community in the coming financial year. Whether you want to give feedback or ask questions, everyone is welcome. Come along and help shape the future of our district.

Taupō

Wednesday 30 March, 3pm-6pm - AC Baths

Thursday 31 March, 10am-noon - Taupō Library

Sunday 3 April, 9am-1pm - Market Central Taupō, Northcroft Reserve

Wednesday 6 April, 3pm-6pm - AC Baths

Thursday 7 April, 10am-noon - Taupō Library

Tūrangi

Saturday 26 March, 10am-noon - Tūrangi Market, town centre

Tuesday 29 March, 10am-noon - Tūrangi Library

Saturday 2 April, 10am-noon - Tūrangi Market, town centre

Tuesday 5 April, 10am-noon - Tūrangi Library

Mangakino

Wednesday 30 March, 10.30am-noon - Mangakino Service Centre, Rangatira Drive

Wednesday 6 April, 10.30am-noon - Mangakino Service Centre, Rangatira Drive

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[Return to the start of the document](#)

 You are not logged in. If you click OK, you will be asked to log in or create an account. If you click Cancel, you will not be asked to log in or create an account.

Monday March 28

10am-1pm: Te Kōpu ā Kānapanapa hui

Tuesday March 29

12.30pm-1pm: Public forum (Zoom, if required)

1pm-3pm: Council meeting (Zoom, livestreamed)

Thursday March 31

2.30pm-3pm: Kinloch Representative Group public forum (Zoom, if required)

3pm-4pm: Kinloch Representative Group meeting (Zoom, livestreamed)

To view go to: taupo.govt.nz/livestream


[Return to the previous page](#)





MEET YOUR MAYOR AND COUNCILLORS

`main = do { putStr "Enter a number: "; doIO $ do`
`getLine`


[Return to Table of Contents](#)

ERROR: C:\Program Files\Microsoft Office\Office12\MSO12BET\MSO12BET.DLL is not a valid Win32 application.

Email your elected members at
councillors@taupo.govt.nz

 Website
 Facebook
 Instagram
 Email


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 Taupō, North Island
 3330
 New Zealand


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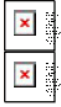
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53



First name: Catriona

Last name: Eagles

Age:

Gender:

Ethnicity:

HEARING: Let us know if you wish to speak at a hearing and your preferred location. *

I do NOT wish to speak in support of my submission and ask that the following submission be fully considered.

Feedback

Do you have any other feedback?

I write this a late submission as an individual, not as a Cheal representative.

Mapi is a great asset and tool for understanding Council assets' and information. It could be further improved through the additional of information already held by Council, into a mapping format. Making this information available via this mapping tool would make the data more accessible and visible to the public and reduce work load by Council staff in providing the information on request. Could consideration be given to fund the further mapping of any following data on Mapi in the near future, perhaps a student for the summer project...:

- Traffic volumes
- Foot traffic data from TaupōCentre Taupo
- Mapping or linking of RCs and BCs on properties
- Mapping or linking of Food Licences on properties
- New LTP and/or capital projects planned or underway
- Major Planning Applications under consideration
- Stormwater overland flow data
- Parking Survey data
- Mapping of proposed road closures (for events for example)
- Linking of Reserve Mgmt Plans on mapping
- Water and wastewater capacities

Attached Documents

File
No records to display.