

Proposed Submission Version Local Plan

PART A - About You

1. Please complete the following:

Please note the email address (if provided below) will be sent a full copy of the submitted response and a unique reference number.

Name of person completing the form: Heather Jones

Email address: [REDACTED]

2. What type of respondent are you? Please select one option only.
If you are an agent please select the type of client you are representing.

Other (please specify):
[REDACTED]

3. Please provide your contact details:

	Contact details
Organisation name (if applicable)	-
Agent name (if applicable)	Heather Jones
Address 1	[REDACTED]
Address 2	-
Postal Town	[REDACTED]
Postcode	[REDACTED]
Telephone number	-

PART B - Representation Form 1

1. To which part of the Local Plan does this representation relate?

From the drop down list please select one option.

Plan as a whole

2. What does your comment relate to? Please select one option.

Both of the above

3. Do you consider the Draft Local Plan to be: Please select one option in each row.

	Yes	No
Legally Compliant	X	
Sound	X	
Compliant with the Duty to Co-operate	X	

6. Please set out what modification(s) you consider necessary to make the Draft Local Plan legally compliant or sound, having regard to the test you have identified above where this relates to soundness. (NB please note that any non-compliance with the duty to co-operate is incapable of modification at examination).

You will need to say why this modification will make the Local Plan legally compliant or sound. It would be helpful if you are able to put forward your suggested revised wording of any policy or text.

Please be as precise as possible.

As a horse owner of many years and living in the area, we would like access to the new park/open areas as bridle/multi user pathways. We have very limited off road space in the surrounding area so this would be a fabulous opportunity to provide safe riding for us.

7. If your representation is seeking a modification, do you consider it necessary to participate at the oral part of the examination? Please select one option.

No, I do not wish to participate at the oral examination

You have just completed a Representation Form for Plan as a whole.

Please select what you would like to do now?

Submit response (I am a Developer / Landowner / Group / Organisation)