

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: Varun

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.

A local resident who lives in Warrington

3. Please provide your contact details:

	Contact details
Organisation name (if applicable)	-
Agent name (if applicable)	-
Address 1	[REDACTED]
Address 2	[REDACTED]
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.

DC3 Green Infrastructure

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

None of the above

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 DC3 Green Infrastructure.

Please select what you would you like to do now?

Complete another Representation Form on a different policy or part of the plan **(Part B)**

PART B - Representation Form 2

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

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 you like to do now?

Complete the final part of the form, Customer 'About You' questions and submit response **(Part C)**