

Vale of White Horse Local Plan Part One: Strategic Sites and Policies

Publication Stage Representation Form

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(For official use only)

Name of the Local Plan to which this representation relates:

Vale of White Horse Local Plan

Response form for the Vale of White Horse strategic planning policy document, the Local Plan Part one. Please return to Planning Policy, Vale of White Horse District Council, Benson Lane, Crowmarsh, Wallingford, OX10 8ED or email planning.policy@whitehorsedc.gov.uk no later than Friday 19 December 2014 by 4.30 pm precisely.

This form has two parts -

Part A – Personal Details

Part B – Your representation(s). Please fill in a separate sheet for each representation you wish to make.

Part A

Personal Details*		2. Agent's Details (if applicable)
*If an agent is appointed, plea boxes below but complete the	se complete only the Title, Name and Organisation full contact details of the agent in 2.	
Title	Dr	
First Name	lan	
Last Name	Brown	
Job Title	Consultant Physician and Head of Service	
(where relevant) Organisation	Oxford University and Oxford University Hospitals	
(where relevant) Address Line 1	Garstane House	
Line 2	The Mulberries	
Line 3	East Hanney	
Line 4	Wantage	
Post Code	OX12 0JS	
Telephone Number		
E-mail Address (where relevant)		

Part B – Please use a separate sheet for each representation

Name or Organisation :				
3. To which part of the Local Plan does	this represen	tation relate?		
Paragraph Yes Policy	Yes	Proposals Map	Yes	
4. Do you consider the Local Plan is:				
4.(1) Legally compliant	Yes		No	No
4.(2) Sound (Positively Prepared, Effective and Justified)	Yes		No	No
4 (3) Complies with the Duty to co- operate	Yes		No	No
Please mark as appropriate.				
 Please give details of why you consider t is unsound or fails to comply with the duty t possible. If you wish to support the legal compliance compliance with the duty to co-operate, pleat comments. 	o co-operate.	Please be as preci	ise as or its	
Please see attached documents.				
6. Please set out what modification(s) you of sound, having regard to the test you have it note that any non-compliance with the duty will need to say why this modification will m sound. It will be helpful if you are able to pur Please be as precise as possible.	dentified at 5 a to co-operate take the Local	above where this re is incapable of mo Plan legally compl	elates to soundness. (odification at examination of the contraction o	(NB Please tion). You
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nd supporting information nece uggested modification, as there urther representations based or	e will not norma	lly be a sul	sequent opp	ortunity to r	make
fter this stage, further subminspector, based on the matte examination.	issions will be	only at th	e request of	•	
If your representation is seeking a mart of the examination?	nodification, do you	ı consider it r	ecessary to par	ticipate at the	oral
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