Vale of White Horse District Council	Vale of White Horse Local Plan Part One: Strategic Sites and Policies Publication Stage Representation Form		Ref: (For official use only)
Name of the Local Plan to	which this representation relates:	Vale of White Horse	e 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

1. Personal Details*		2. Agent's Details (if applicable)
*If an agent is appointed, please com boxes below but complete the full con	plete only the Title, Name and Organisation ntact details of the agent in 2.	
Title	Mr Carter & Mrs Jones	Mr
First Name		Steven
Last Name		Sensecall
Job Title		Partner
(where relevant) Organisation		Kemp & Kemp
(where relevant) Address Line 1		1-3 Ock Street
Line 2		Abingdon-on-Thames
Line 3		Oxon
Line 4		
Post Code		OX14 5AL
Telephone Number		01865 240001
E-mail Address (where relevant)		ssensecall@kempandkemp.co.uk

Part B – Please use a separate sheet for each representation

Name or Organisation :				
3. To which part of the Local Plan	o does this represen	tation relate?		
Paragraph F	Policy Core Policy 20	Proposals M	lap	
4. Do you consider the Local Plan	nis :			
4.(1) Legally compliant	Yes	X	No	
4.(2) Sound (Positively Prepared, Effective and Justified)	Yes		No	x
4 (3) Complies with the Duty to cooperate	^{D-} Yes	x	No	

Please mark as appropriate.

5. Please give details of why you consider the Local Plan is not legally compliant or is unsound or fails to comply with the duty to co-operate. Please be as precise as possible.

If you wish to support the legal compliance or soundness of the Local Plan or its compliance with the duty to co-operate, please also use this box to set out your comments.

See attached statement.

6. Please set out what modification(s) you consider necessary to make the Local Plan legally compliant or sound, having regard to the test you have identified at 5 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 will be helpful if you are able to put forward your suggested revised wording of any policy or text. Please be as precise as possible.

See attached statement

Please note your representation should cover succinctly all the information, evidence and supporting information necessary to support/justify the representation and the suggested modification, as there will not normally be a subsequent opportunity to make further representations based on the original representation at publication stage.

After this stage, further submissions will be only at the request of the Inspector, based on the matters and issues he/she identifies for examination.

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



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

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Yes, I wish to participate at the oral examination

8. If you wish to participate at the oral part of the examination, please outline why you consider this to be necessary:

Kemp & Kemp wish to appear on behalf of Mrs Jones and Mr Carter at the Examination to confirm its support for the Council's spatial strategy and to provide written and oral evidence as to the availability and deliverability of the allocated site at Stanford in the Vale.

Kemp & Kemp also wish to appear to present the case for the reinstatement of the larger number of houses at the allocated site at Stanford in the Vale.

Please note the Inspector will determine the most appropriate procedure to adopt to hear those who have indicated that they wish to participate at the oral part of the examination.

Signature: