

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

	se complete only the Title, Name and Organisation full contact details of the agent in 2.	2. Agent's Details (if applicable)
Title		Mr
First Name		Steven
Last Name		Sensecall
Job Title (where relevant)		Partner
Organisation	W G Carter Ltd	Kemp and Kemp LLP
(where relevant) Address Line 1	81A Eaton Rd	1 – 3 Ock Street
Line 2	Appleton	Abingdon on Thames
Line 3	Abingdon	OXON
Line 4	OXON	
Post Code	OX13 5JJ	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 Org	ganisation :				
3. To which	part of the Local Plan doe	s this represen	tation relate?		
Paragraph	All Policy supporting text	Core Policy 3: Settlement Hierarchy	Proposals Map		
4. Do you co	onsider the Local Plan is:				
4.(1) Legally	compliant	Yes	$\sqrt{}$	No	
4.(2) Sound Effective and	(Positively Prepared, d Justified)	Yes		No 	V
4 (3) Compli operate	es with the Duty to co-	Yes	N/A	No	
Please ma	rk as appropriate.				
is unsound of possible. If you wish to	ve details of why you consor fails to comply with the construction support the legal compliments the duty to co-operate	duty to co-opera ance or soundn	ate. Please be as property of the Local Pla	recise as an or its	
Please see a	attached response				
or sound, ha Please note examination sound. It will	t out what modification(s) ving regard to the test you that any non-compliance). You will need to say who be helpful if you are able be as precise as possible	u have identified with the duty to y this modification to put forward	d at 5 above where co-operate is incap ion will make the Lo	this relates to sound able of modification cal Plan legally con	dness. (NB at apliant or
Please see a	attached response				

and support suggested r	ing information r modification, as t	ation should cove necessary to supp here will not norm s based on the or	ort/justify to ally be a s	the represaubsequen	entation and to topportunity t	he fo
	based on the m	bmissions will b atters and issue:	•	•		
	sentation is seeking	g a modification, do y	ou consider	it necessary	to participate at	the oral
	No , I do not wish to oral examination	participate at the	V	Yes, I wish	n to participate a	t the
8. If you wish be necessary:	to participate at the	oral part of the exam	ination, plea	se outline w	hy you consider	this to
W G Carter's o		ters that are best pre	sented by a	combination	of written staten	nent
Please note th	ne Inspector will det	ermine the most app	ropriate proc	edure to add	opt to hear those	who
		articipate at the oral p				
Sig	nature:				Date:	18/12/2014