

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	rep	rese	ntation	relates:
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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*		Agent's Details (if applicable)
	ase complete only the Title, Name and Orga e full contact details of the agent in 2.	anisation
Title	Mr and Mrs	Mr
First Name		Paul
Last Name	Comley	Slater
Job Title		Senior Planner
(where relevant) Organisation (where relevant)		Edgars Limited
Address Line 1		Aelfric Court
Line 2		2 Oxford Road
Line 3		Eynsham
Line 4		Witney
Post Code		OX29 4HG
Telephone Number		01865 731700
E-mail Address (where relevant)		paul@edgarslimited.co.uk

Part B – Please use a separate sheet for each representation

Name or Organisation :				
3. To which part of the Local Plan does	s this represent	ation relate?		
Paragraph Policy	Core Policy 5	Proposals Map		
4. Do you consider the Local Plan is:				
4.(1) Legally compliant	Yes	Х	No	
4.(2) Sound (Positively Prepared, Effective and Justified)	Yes		No	х
4 (3) Complies with the Duty to cooperate	Yes	X	No	
Please mark as appropriate.				
5. Please give details of why you consist unsound or fails to comply with the copossible. If you wish to support the legal compliance with the duty to co-operate comments.	luty to co-opera	ate. Please be as predess of the Local Plan	or its	

Mr and Mrs Comley object to the housing supply ring fence on the basis that it will threaten the overall delivery of housing and economic growth.

Please see attached representations.

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.

	9		dely to include the	writine or
the South East Vale S	Sub Area, including Eas	t Challow.		
Please see attached r	epresentations.			
Please note your represent supporting information, uggested modification, nake further representatinge. After this stage, further is pector, based on the examination. If your representation is se	on necessary to suppo as there will not norma tions based on the orig r submissions will be e matters and issues	ort/justify the ally be a subsginal represented the confusion of the confu	representation and sequent opportunite intation at publication request of the attitudes for	d the y to on
art of the examination?	oking a modification, do yo	a consider it no	occoury to participate	at the oral
No , I do not wis oral examinatio	sh to participate at the n		es, I wish to participate al examination	e at the
. If you wish to participate a	t the oral part of the exami	nation please o	outline why you consid	er this to
e necessary:	tino oral part of the oxam	nation, prodoc c	raumo mny you comora	
				ose who
				ose who
Please note the Inspector win ave indicated that they wish Signature:		art of the exami		ose who