

## 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

*If an agent is appointed, please complete only the Title, Name and Organisation boxes below but complete the full contact details of the agent in 2.  Title Oxford Diocese Board of Finance (ODBF)  First Name Ian  Last Name Gillespie  Job Title Partner  (where relevant)  Organisation (where relevant)  Address Line 1  Line 2  Z56 Banbury Road	
First Name  Last Name  Job Title (where relevant) Organisation (where relevant) Address Line 1  Mr  Ian  Gillespie  Partner  Carter Jonas  Mayfield House	
Last Name  Gillespie  Partner  (where relevant)  Organisation (where relevant)  Address Line 1  Gillespie  Partner  Carter Jonas  Mayfield House	
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Organisation (where relevant) Address Line 1  Carter Jonas  Mayfield House	
(where relevant) Address Line 1 Mayfield House	
Address Line 1 Mayfield House	
Line 2 256 Banbury Road	
Line 2 256 Banbury Road	
Line 3 Oxford	
Line 4	
Post Code OX2 7DE	
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 representation relate?								
Paragraph Police	Core Policy 3	Proposals M	ар					
4. Do you consider the Local Plan is :								
4.(1) Legally compliant	Yes		No					
4.(2) Sound (Positively Prepared, Effective and Justified)	Yes	х	No					
4 (3) Complies with the Duty to co- operate	Yes		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.

The proposed Settlement Hierarchy for Vale of White Horse District identifies four tiers of settlement (Market Towns, Local Service Centres, Larger Villages and Smaller Villages) - based on an assessment of the sustainability of each settlement.

Draft Core Policy 3 classifies both Shrivenham and Cumnor as Larger Villages.

We support the position of these settlements in the hierarchy and note that in addition to allocated development – new development will be permitted where it meets local needs and to support employment, services and local communities.

6. Please set out what modificat compliant or sound, having regato soundness. (NB Please note tincapable of modification at exathe Local Plan legally compliant suggested revised wording of a	ard to the test you h hat any non-compli mination). You will or sound. It will be	ave identification ance with the say helpful if your properties.	ed at 5 above he duty to co why this moon are able	ve where this re co-operate is odification will to put forward y	lates make		
N/A							
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 ma	atters and issues	s he/she id	dentifies f	for			
7. If your representation is seeking part of the examination?	a modification, do yo	ou consider i	t necessary	to participate at	the oral		
No, I do not wish to oral examination	participate at the	х	<b>Yes</b> , I wish oral exami	n to participate at nation	the		
8. If you wish to participate at the be necessary:	oral part of the exam	ination, plea	se outline w	hy you consider t	his to		
We would like to participate at t Diocese Board of Finance that	•		•				
Please note the Inspector will determine have indicated that they wish to pa				ppt to hear those	who		
Signature:				Date:	19 <sup>th</sup> December 2014		