

	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 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*

**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.*

2. Agent's Details (if applicable)

Title	Mr	
First Name	Patrick	
Last Name	Lonergan	
Job Title (where relevant)		
Organisation (where relevant)		
Address Line 1	35 Cherwell Close	
Line 2	Abingdon	
Line 3		
Line 4		
Post Code	OX14 3TD	
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 Core Strategy does this representation relate?

Paragraph **5.39** Policy **13** Proposals Map

4. Do you consider the DPD is :

4.(1) Legally compliant	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
4.(2) Sound (Positively Prepared, Effective and Justified)	Yes	<input type="checkbox"/>	No	NO
4 (3) Complies with the Duty to co-operate		<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

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 inclusion of sites in the Green Belt is not justified. The Green Belt should be a **last** resort. It is incongruous to 'suggest' that the non-Green Belt sites in the plan are the only ones available/suitable. In fact, one of the council's supporting papers, leading up to the publication of this plan, listed 10 sites which were not explored in detail. I did not find the reasons for their exclusion compelling. For example, "the site would spoil the view from the AONB". Another was to prevent two villages joining up. If the latter is an alternative to building in the Green Belt, and there is no other alternative, then I believe such a site should be in the plan. After all, Abingdon itself was once the size of a modern village, notwithstanding having had its charter since 1556. At least two suburbs of Abingdon, Northcourt and Calcecott were once villages, albeit Northcourt is now a conservation area. Given that the council was looking for sites of at least 200 houses, and assuming this applied to the 10 sites, then their inclusion would more than replace the sites, at least those to the north of Abingdon, and possibly all the sites proposed for building in the Green Belt.

--

(continue on a separate sheet/expand box if necessary)

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.

TYPE **YOUR** VIEWS HERE-

See my comments above about the 10 sites earlier identified by the council.

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

☐ 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:

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:

Date:

17
Dec
2014

Part B – Please use a separate sheet for each representation

Name or Organisation :

3. To which part of the Core Strategy does this representation relate?

Paragraph Policy Proposals Map

4. Do you consider the DPD is :

4.(1) Legally compliant	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
4.(2) Sound (Positively Prepared, Effective and Justified)	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox" value="NO"/>
4 (3) Complies with the Duty to co-operate		<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

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.

--	--

(continue on a separate sheet/expand box if necessary)

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.

TYPE **YOUR** VIEWS HERE-

--

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

	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:

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:

Date:

nn
Dec
2014

Part B – Please use a separate sheet for each representation

Name or Organisation :

3. To which part of the Core Strategy does this representation relate?

Paragraph Policy Proposals Map

4. Do you consider the DPD is :

4.(1) Legally compliant	Yes	<input checked="" type="checkbox"/>	No	<input type="text"/>
4.(2) Sound (Positively Prepared, Effective and Justified)	Yes	<input type="text"/>	No	<input type="text" value="NO"/>
4 (3) Complies with the Duty to co-operate		<input checked="" type="checkbox"/>	No	<input type="text"/>

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.

--	--

(continue on a separate sheet/expand box if necessary)

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.

TYPE **YOUR** VIEWS HERE-

--

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

	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:

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:

Date:

nn
Dec
2014

Part B – Please use a separate sheet for each representation

Name or Organisation :

3. To which part of the Core Strategy does this representation relate?

Paragraph Policy Proposals Map

4. Do you consider the DPD is :

4.(1) Legally compliant	Yes	<input checked="" type="checkbox"/>	No	<input type="text"/>
4.(2) Sound (Positively Prepared, Effective and Justified)	Yes	<input type="text"/>	No	<input type="text" value="NO"/>
4 (3) Complies with the Duty to co-operate		<input checked="" type="checkbox"/>	No	<input type="text"/>

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.

--	--

(continue on a separate sheet/expand box if necessary)

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.

TYPE **YOUR** VIEWS HERE-

--

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

	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:

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:

Date:

nn
Dec
2014

Part B – Please use a separate sheet for each representation

Name or Organisation :

3. To which part of the Core Strategy does this representation relate?

Paragraph

X.XX

Policy

N

Proposals
Map

4. Do you consider the DPD is :

4.(1) Legally compliant

Yes



No

4.(2) Sound (Positively Prepared,
Effective and Justified)

Yes

No

NO

4 (3) Complies with the Duty to
co-operate



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.

--	--

(continue on a separate sheet/expand box if necessary)

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.

TYPE **YOUR** VIEWS HERE-

--

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

	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:

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:

Date:

nn
Dec
2014

Part B – Please use a separate sheet for each representation

Name or Organisation :

3. To which part of the Core Strategy does this representation relate?

Paragraph Policy Proposals Map

4. Do you consider the DPD is :

4.(1) Legally compliant	Yes	<input checked="" type="checkbox"/>	No	<input type="text"/>
4.(2) Sound (Positively Prepared, Effective and Justified)	Yes	<input type="text"/>	No	<input type="text" value="NO"/>
4 (3) Complies with the Duty to co-operate		<input checked="" type="checkbox"/>	No	<input type="text"/>

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.

--	--

(continue on a separate sheet/expand box if necessary)

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.

TYPE **YOUR** VIEWS HERE-

--

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

	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:

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:

Date:

nn
Dec
2014

Part B – Please use a separate sheet for each representation

Name or Organisation :

3. To which part of the Core Strategy does this representation relate?

Paragraph Policy Proposals Map

4. Do you consider the DPD is :

4.(1) Legally compliant	Yes	<input checked="" type="checkbox"/>	No	<input type="text"/>
4.(2) Sound (Positively Prepared, Effective and Justified)	Yes	<input type="text"/>	No	<input type="text" value="NO"/>
4 (3) Complies with the Duty to co-operate		<input checked="" type="checkbox"/>	No	<input type="text"/>

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.

--	--

(continue on a separate sheet/expand box if necessary)

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.

TYPE **YOUR** VIEWS HERE-

--

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

	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:

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:

Date:

nn
Dec
2014