

Neighbourhood Planning Area Designation Application Form



Application to designate a Neighbourhood Area
Town and Country Planning Act 1990
Neighbourhood Planning (General) Regulations 2012



1. Single point of contact regarding the Neighbourhood Plan

Title: First Name: Surname:

Address:

Postcode:

Email:

2. Parish clerk details (if different from those above)

Title: First Name: Surname:

Address:

Postcode: Telephone:

Email:

3. Relevant Body

Please confirm that you are the relevant body to undertake neighbourhood planning in your area in accordance with section 61G of the 1990 Act and section 5C of the 2012 Regulations.

Yes No

Name of Relevant Body:

Note: in areas covered by a town or parish council, the town or parish council is the relevant body. For applications covering more than one parish area, please nominate a lead parish to act as the Relevant Body. If your area is not covered by a parish council (only a parish meeting), please contact the Planning Policy Team before making your application.

4. Extent of area

Please attach an OS plan showing the extent of the proposed Neighbourhood Area and indicate below the relationship of the proposed area to parish boundaries. For further information about obtaining OS maps please see note 1.

Proposed area covers the whole of a single parish boundary area:

Proposed area covers part of a single parish boundary area:

Proposed area covers multiple parish boundary areas:

5. Applications covering more than one parish area:

If your application area covers more than one parish area, please list the parishes covered by the area application, the extent of the parish included and obtain consent from the parish by getting them to sign below:

Name Town/Parish Council	Extent of parish included in Neighbourhood Area	Name and Position	Authorising Signature

By signing this form your Parish Council is agreeing to the inclusion of part or the whole of your parish into the Neighbourhood Area named below and shown on the attached OS map.

6. Name of Neighbourhood Area

Please give the name by which your Neighbourhood Area will be formally known

EAST HANNEY

7. Intention of neighbourhood area:

Please indicate which of the following you intend to undertake within your neighbourhood area:

Neighbourhood Development Plan:

Neighbourhood Development Order:

Community Right to Build Order:

8. Reasons for considering the area appropriate

Please briefly describe below why you consider this area is appropriate to be designated as a Neighbourhood Area:

THE AREA MATCHES THE BOUNDARIES OF THE PARISH EXACTLY.

9. Previous applications

Has this relevant body previously submitted an application to designate a neighbourhood area, which has not yet been determined?

Yes

No

10. Withdrawal of previous application

If you answered 'yes' to question 9 above, please sign below to withdraw your previous application

I/we hereby wish to withdraw any previous application/s to designate a neighbourhood area made by this relevant body

Name:

Date:

Signature:

11. Declaration

I/we hereby apply to designate a Neighbourhood Area as described on this form and the accompanying plan.

Name:

Date:

Signature:

Please return the form to:

Vale of White Horse District Council
Benson Lane, Crowmarsh Gifford,
Wallingford, Oxfordshire, OX10 8ED

or

South Oxfordshire District Council
Benson Lane, Crowmarsh Gifford,
Wallingford, Oxfordshire, OX10 8ED

planning.policy@whitehorsedc.gov.uk

or

planning.policy@southoxon.gov.uk

Publications of applications to the Council's website.

Please note, as required under the Neighbourhood Planning (General) Regulations 2012, a copy of this form and accompanying information will be published on the Council's website. However, all personal information, with the exception of the name and address of the main contacts, will be redacted from the website. The complete form will be available to view in the council offices. If you require any further clarification, please contact the Planning Policy Team.

