# Neighbourhood Planning Area Designation Application Form



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



. Single point of	f contact regarding the Neigh	bourhood Plan
Title:	First Name:	Surname:
Address:		
Postcode:	Telephone:	
Email:		

2. Parish cierk 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:			
			body. For applications covering more than 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 Neighborhood Area	Name and Position	Authorising Signature
	signing this form your Parish Co med below and shown on the att	uncil is agreeing to the inclusion of ached OS map.	part or the whole of your paris	sh into the Neighbourhood Area

## 6. Name of Neighbourhood Area

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

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:		
<ul> <li>8. Reasons for considering the area appropriate</li> <li>Please briefly describe below why you consider this area is appropriate to be designated as a Neighbourhood Area:</li> </ul>		
9. Previous applications		
Has this relevant body previously submitted an application to designate a neighbourhood area, which has not yet been determined?		
Yes No 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:		
<b>11. Declaration</b> I/we hereby apply to designate a Neighbourhood Area as described on this form and the accompanying plar	2	
Name: Date:	1.	
Signature:		
Please return the form to:		
135 Eastern Avenue 135 Eastern Avenue		
Milton, Milton Park, OX144SB Milton, Milton Park, OX144SB 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.