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| Ref  |                      |  |

#### Core Strategy Development Plan Document

Regulation 20 of the Town & Country (Local Development) (England) Regulations 2012.

### Representation Form

#### PART A: PERSONAL DETAILS

\* If an agent is appointed, please complete only the Title, Name and Organisation in box 1 below but complete the full contact details of the agent in box 2.

|                               | 1. YOUR DETAILS* | 2. AGENT DETAILS (if applicable)  |
|-------------------------------|------------------|-----------------------------------|
| Title                         | Councillor       |                                   |
| First Name                    |                  |                                   |
| Last Name                     | Smith            |                                   |
| Job Title<br>(where relevant) | -                |                                   |
| Organisation (where relevant) | -                |                                   |
| Address Line 1                |                  |                                   |
| Line 2                        |                  |                                   |
| Line 3                        | likley           |                                   |
| Line 4                        |                  |                                   |
| Post Code                     | LS29             |                                   |
| Telephone Number              |                  |                                   |
| Email Address                 |                  |                                   |
| Signature:                    |                  | Date: 29 <sup>th</sup> March 2014 |

#### Personal Details & Data Protection Act 1998

Regulation 22 of the Town & Country Planning (Local Development) (England) Regulations 2012 requires all representations received to be submitted to the Secretary of State. By completing this form you are giving your consent to the processing of personal data by the City of Bradford Metropolitan District Council and that any information received by the Council, including personal data may be put into the public domain, including on the Council's website. From the details above for you and your agent (if applicable) the Council will only publish your title, last name, organisation (if relevant) and town name or post code district.

Please note that the Council cannot accept any anonymous comments.

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#### PART B - YOUR REPRESENTATION - Please use a separate sheet for each representation.

| 3. To which part o   | f the Plan does t  | his representation re | late? |        |     |
|----------------------|--------------------|-----------------------|-------|--------|-----|
| Section              | 3                  | Paragraph             | В3    | Policy | SC5 |
| 4. Do you conside    | r the Plan is:     |                       |       |        |     |
| 4 (1). Legally comp  | liant              | Yes                   |       | No     | ?   |
| 4 (2). Sound         |                    | Yes                   |       | No     | х   |
| 4 (3). Complies with | n the Duty to co-o | perate Yes            |       | No     | х   |

5. Please give details of why you consider the Plan is not legally compliant or is unsound or fails to comply with the duty to co-operate. Please refer to the guidance note and be as precise as possible.

If you wish to support the legal compliance, soundness of the Plan or its compliance with the duty to co-operate, please also use this box to set out your comments.

Location of Development: Because the standards are simplistic they give no real guidance to the access requirements available to communities.

They do take no account of the already inadequate local infrastructure or the relevance of the destinations of such transport to the facilities and work opportunities that they are supposed to access.

For example bus timetables may be half hourly in some parts of the day but only hourly for what may be the majority of the day, and as such do not meet adequate access standards for "Local Service Areas".

As an example from Menston, a designated "Local Service Area" and indeed for much of Lower Wharfedale, the 10 mile bus route has a twice hourly timetable into Leeds City Centre morning and evening along a gridlocked A65. For the rest of the day the service is hourly. As the route for most of its length does not, and because of geographical constraints never will have, have bus lanes it is no quicker than a car. The irrelevance of such an access statement is compounded by the employment sites for most of the residents of Wharfedale are away from any accessible bus routes from Menston.

Similarly for Hospitals which, since the closure of the Accident and Emergency hospital in Otley some years ago, there is very limited directly easily accessible public transport with journeys times of around an hour again from Menston or Burley. Reference in the strategy to cycling pays no recognition to the topography.

The Access Standard as stated will give a false impression of accessibility for Menston and Burley residents to particularly employment, primary health facilities, and education outside the valley.

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| 6. | Please set out what modification(s) you consider necessary to make the Plan legally compliant or                              |
|----|---|
|    | sound, having regard to the test you have identified at question 5 above where this relates to the                            |
|    | soundness. (N.B 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 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.

|                           | cise as possible.   | a revisea word   | ing of any pointy of text. I leade be |
|---------------------------|---|------------------|---------------------------------------|
|                           | ndards should be completely redrafted to a ues for a community.   | form that prope  | erly recognises the reality of actual |
|                           |   |                  |                                       |
| necessary t<br>subsequent | e your representation should cover succinctly all<br>to support/justify the representation and the sugg<br>t opportunity to make further representations bas<br>as precise as possible. | gested change, a | as there will not normally be a       |
|                           | stage, further submissions will be only at the the he/she identifies for examination.   | request of the   | Inspector, based on the matters       |
|                           | epresentation is seeking a modification to the<br>oral part of the examination?   | Plan, do you o   | consider it necessary to participate  |
|                           | No, I do not wish to participate at the oral ex   | amination        |                                       |
| х                         | Yes, I wish to participate at the oral examina  | ation            |                                       |
| 8. If you wi              | ish to participate at the oral part of the exami<br>eary:   | nation, please o | outline why you consider this to be   |
|                           |   |                  |                                       |
| To ensure t               | hat a local, democratically elected voice is heard  | 1.               |                                       |
|                           | e the Inspector will determine the most appropri<br>have indicated that they wish to participate at the   |                  |                                       |
| 9. Signatu                | ure:  | Date:            | 29 <sup>th</sup> March 2014           |

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## Core Strategy Development Plan Document (DPD): Publication Draft

#### PART C: EQUALITY AND DIVERSITY MONITORING FORM

Bradford Council would like to find out the views of groups in the local community. Please help us to do this by filling in the form below. It will be separated from your representation above and will not be used for any purpose other than monitoring.

| Please place an 'X' in the appropriate boxes. |
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