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City of Bradford Metropolitan District Council

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.

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BEFORE ANY ADDITIONAL HOUSING IS

LONG OPERCY.

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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 to the Plan, do you consider it necessary to participate at the oral part of the examination?			
		No, t 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 when considering to hear those who have indicated that they wish to participate at the oral part of the examination.

9. Signature: 27/03/14-

Personal Details & Data Protection Act 1998

Regulation 22 of the Town & Country Planning (Loca! 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.

To: City of Bradford Metropolitan District Council PLANINING SERVICE **S**ECEIVED For Office Use Only: 中 I MAR 20th Date: Ref: Core Strategy Development Plan Document Regulation 20 of the Town & Country (Local Development) (England) Regulations 2012, **Publication Draft - Representation Form** PART A: PERSONAL DETAILS Details - First Name: Second Name: Address: Title: 1216664 MR 1529 Tel: PART B - YOUR REPRESENTATION - Please use a separate sheet for each representation. 3. To which part of the Plan does this representation relate? Section MARIOUS Paragraph VARIOUS VARIOUS 4. Do you consider the Plan is: 4. (2) Sound Yes 4. (3) Complies with the Duty to co-operate Yes No 5. Please give dotails 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 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. I AM NOT AWARE OF MY MAJOR ROAD IMMOVENTS BEING (OR TO BE) CARRIED OUT ON THE AGS, THIS ROAD IS ALREADY OMERLOADED AND THE PROPOSED DEVELOPMENTS WOULD EXACENSATE THIS LEADING TO MONE CONGESTION, POLLUTION (FROM STANDONG TRAFFIC)
AND CASUANTIES FROM AN INCREASED NOMBER OF AUX TARFFIL ACCIDENTS

City of Bradford Metropolitan District Council

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