

Core Strategy Development Plan Document Proposed Main Modifications – November 2015 Representation Form

For Office Use only:	
Date	
Ref	

The Council are seeking comments on the Proposed Main Modifications to the Core Strategy, following the Examination in Public in March 2015. The changes are proposed by the Council to address issues of legal compliance and soundness and we can only accept representations on these matters.

Comments on the Proposed Main Modifications Schedule are invited from **Wednesday 25th November 2015 until Wednesday 20th January 2016.**

REPRESENTATIONS MUST ONLY RELATE TO THE PROPOSED MAIN MODIFICATIONS.

You can access the Core Strategy documents online and additional copies of this form from our website: www.bradford.gov.uk/planningpolicy then 'Core Strategy Proposed Main Modifications', or you may request copies by:

- Emailing us at: planning.policy@bradford.gov.uk
- Phoning us on: (01274) 433679

Completed representation forms must be returned to Development Plans, by the deadline below, by either:

- **E-mail to:** planning.policy@bradford.gov.uk
- **Post to:** Core Strategy - Proposed Main Modifications
Development Plans Group
City of Bradford Metropolitan District Council
2nd Floor South - Jacobs Well
Nelson Street
Bradford
BD1 5RW

**ALL COMMENTS MUST BE MADE IN WRITING AND SHOULD BE RECEIVED
BY THE DEVELOPMENT PLAN GROUP AT EITHER OF THE ABOVE ADDRESSES
NO LATER THAN 4PM ON WEDNESDAY 20TH JANUARY 2016.**

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 A: PERSONAL DETAILS

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

	1. YOUR DETAILS*	2. AGENT DETAILS (if applicable)	
Title	MRS		
First Name			
Last Name	KIDMAN		
Job Title (where relevant to this representation)	CHAIR		
Organisation (where relevant to this representation)	ILKLEY CIVIC SOCIETY		
Address Line 1			
Line 2			
Line 3	Ilkley		
Line 4	W Yorks		
Post Code	LS29		
Telephone Number			
Email Address			
Signature:		Date:	15.01.16

3. Please let us know if you wish to be notified of the following:

The publication of the Inspector's Report?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
The adoption of the Core Strategy?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

Are you attaching any additional sheets / documents that relate to this representation?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
	No of sheets / documents submitted :	10 representations.		

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PART B – YOUR REPRESENTATION - Please use a separate sheet for each representation.
(Additional Part B forms can be downloaded from the web page)

4. To which proposed main modification does this representation relate?

Proposed Main Modification number:

5. Do support or object the proposed main modification?

Support

Object

6. Do you consider the proposed main modification to be 'legally compliant'?

Yes

No

7. Do you consider the proposed main modification to be 'sound'?

Yes

No – 'unsound'

8. If you consider the proposed main modification to be 'unsound', please identify which test of soundness your comments relate to?

Positively prepared

Justified

Effective

Consistent with National Planning Policy (the NPPF)

9. Please give details of why you consider the proposed main modification is not legally compliant or is unsound in light of the main modifications proposed. Please be as precise as possible.

If you wish to support the proposed main modification please use this box to set out your comments.

(Please note: Your representation should cover succinctly all the information, evidence and supporting information necessary to support / justify the representation and the suggested change. It is important that your representation relates to the proposed main modifications).

10. Please set out what changes you consider necessary to make the proposed main modification legally compliant or sound, having regard to the test you have identified at Q7 above.

You need to say why this change will make the proposed main modification 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.

11. Signature:

Date:

Thank you for taking the time to complete this Representation Form.