



Local Plan Publication Stage Representation Form

Ref:

(For official use only)

Name of the Local Plan to which this representation relates:

South Staffordshire Council Local Plan 2018 - 2039

2. Agent's Details (if

Please return to South Staffordshire Council BY 12 noon Friday 23 December 2022

This form has two parts -

Part A - Personal Details: need only be completed once.

Part B - Your representation(s). Please fill in a separate sheet for each

representation you wish to make.

Part A

1. Personal

Details* *If an agent is appoint boxes below but comp	ted, please complete only the Title, Name ar lete the full contact details of the agent in 2	applicable) and Organisation (if applicable)
Title	MR	MR
First Name	STUART	MARK
Last Name	EIELD	SITCH
Job Title (where relevant)	ASSOCIATE PLANNING DIRECTOR	DIRECTOR
Organisation	L&Q ESTATES	BARTON WILLMORE NOW STANTEC
(where relevant)		
Address Line 1		BANK HOUSE
Line 2		8 CHERRY STREET
Line 3		BIRMINGHAM
Line 4		
Post Code		B2 5AL
Telephone		0121 711 5155
Number		
E-mail Address		MARK. STICHE BARTON WILLMORE. CO. UK



Part B - Please use a separate sheet for each representation

Name or Organisation:				
3. To which part of the Local Plan	does this re	epresentation rela	te?	
Paragraph Policy	D54	Policies Map		
4. Do you consider the Local Plan	is :		į	
(1) Legally compliant	Yes		No	
(2) Sound	Yes		No	
(3) Complies with the Duty to co-operate	Yes		No	
Please tick as appropriate			,	
5. Please give details of why you of is unsound or fails to comply with possible. If you wish to support the legal compliance with the duty to co-op comments.	the duty to impliance or	co-operate. Pleas soundness of the	se be as pr e Local Plai	ecise as
PLEASE SEE ACCOMPA	nytng	REPRESENT	MOITA	
	(Continue	on a separate sheet /e	expand box if	necessary)

6. Please set out the modification(s) you consider necessary to make the Local Plan legally compliant and sound, in respect of any legal compliance or soundness matters you have identified at 5 above. (Please note that non-compliance with the duty to co-operate is incapable of modification at examination). You will need to say why each modification will make the Local 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.



Part B – Please use a separate sheet for each representation

Name or Organisation:				
3. To which part of the Local	Plan does this re	presentation rela	ite?	
Paragraph Po	DS 5	Policies Map		
4. Do you consider the Local I	Plan is :			
(1) Legally compliant	Yes		No	
(2) Sound	Yes		No	
(3) Complies with the Duty to co-operate	Yes		No	
Please tick as appropriate				
5. Please give details of why y is unsound or fails to comply possible. If you wish to support the legal compliance with the duty to comments.	with the duty to al compliance or	co-operate. Pleas	se be as pi e Local Pla	recise as n or its
PLEASE SEE ACC	OMPANY IN	REPRESE	TATE	·N.
	1990			
	(Continue o	on a separate sheet /	expand box i	f necessary)

6. Please set out the modification(s) you consider necessary to make the Local Plan legally compliant and sound, in respect of any legal compliance or soundness matters you have identified at 5 above. (Please note that non-compliance with the duty to co-operate is incapable of modification at examination). You will need to say why each modification will make the Local 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.

Part B - Please use a separate sheet for each representation

Name or Organisation:				
3. To which part of the Local Plan does this representation relate?				
Paragraph	Policy DS 6	Policies Map		
4. Do you consider the Loca	al Plan is :			
(1) Legally compliant	Yes		No	
(2) Sound	Yes		No	_/
(3) Complies with the Duty to co-operate	Yes		No	
Please tick as appropriate				
5. Please give details of why is unsound or fails to compl possible. If you wish to support the le compliance with the duty to comments.	y with the duty	to co-operate. Plea or soundness of th	ise be as pi ie Local Pla	recise as n or its
PLEASE SEE ACC	IYUA9 MOZ	NE REPRE	SENTA.	rion)
	(Continu	ue on a separate sheet ,	expand box it	f necessary)

6. Please set out the modification(s) you consider necessary to make the Local Plan legally compliant and sound, in respect of any legal compliance or soundness matters you have identified at 5 above. (Please note that non-compliance with the duty to co-operate is incapable of modification at examination). You will need to say why each modification will make the Local 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.

Part B – Please use a separate sheet for each representation

Name or Organisation:				
3. To which part of the Local Plan does this representation relate?				
Paragraph	Policy SA1 - SA4	Policies Map		
4. Do you consider the Loc	cal Plan is :			
(1) Legally compliant	Yes		No	
(2) Sound	Yes		No	
(3) Complies with the Duty to co-operate	Yes		No	
Please tick as appropriate				
5. Please give details of why you consider the Local Plan is not legally compliant or is unsound or fails to comply with the duty to co-operate. Please be as precise as possible. If you wish to support the legal compliance or soundness of the Local Plan or its compliance with the duty to co-operate, please also use this box to set out your comments.				
PLEASE SEE AC	COMPANYIN	F REPRE	SENT A	TION

6. Please set out the modification(s) you consider necessary to make the Local Plan legally compliant and sound, in respect of any legal compliance or soundness matters you have identified at 5 above. (Please note that non-compliance with the duty to co-operate is incapable of modification at examination). You will need to say why each modification will make the Local 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.

(Continue on a separate sheet /expand box if necessary)

PLEASE SEE ACCOMPANYING REPRESENTATION

(Continue on a separate sheet /expand box if necessary)

Please note: In your representation you should provide succinctly all the evidence and supporting information necessary to support your representation and your suggested modification(s). You should not assume that you will have a further opportunity to make submissions.

After this stage, further submissions may only be made if invited by the Inspector, based on the matters and issues he or she identifies for examination.

7. If your representation is seeking a modification to the plan, do you consider it necessary to participate in examination hearing session(s)?

	No, I do not wish to
	participate in
	hearing session(s)



Yes, I wish to participate in hearing session(s)

Please note that while this will provide an initial indication of your wish to participate in hearing session(s), you may be asked at a later point to confirm your request to participate.

8. If you wish to participate in the hearing session(s), please outline why you consider this to be necessary:

IN ORDER TO ENSURE FAIR CONSIDERATION OF EVIDENCE AND OMISSION SITE.