



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 2023 - 2041

Please return to South Staffordshire Council by 12 noon Friday 31 May 2024

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

 Personal 		Agent's Details (if
Details*		applicable)
*If an agent is appoin	ted, please complete only the Title, Name	and Organisation (if applicable)
boxes below but comp	plete the full contact details of the agent in	n 2.
Title		Miss
First Name		Louisa
THSC Name		
Last Naus		144.
Last Name		Ward
Job Title		Senior Planner
(where relevant)		
Organisation	Crest Nicholson Midlands	Avison Young
(where relevant)		
Address Line 1	C/O Agent	3 Brindleyplace
	3, 3 / · · · · · · · · · · · ·	- · · · · · · · · · · · · · · · · · · ·
Line 2		Birmingham
LITIE Z		Diffilligitatii
Line 3		
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Post Code		B1 2JB
1 03t Code		51 255
T. I I		
Telephone		0121 609 8055
Number		
E-mail Address		louisa.ward@avisonyoung.com
(whore relevant)	<u> </u>	



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	DS5, SA3	Policies Map		
4. Do you consider the Local Plan	is :			
(1) Legally compliant	Yes	Х	No	
(2) Sound	Yes	Х	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 accompanying lette	r for details.			
	(Continue o	on a separate sheet /e	expand box	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.



Please see accompanying letter for details.			
(Continue on	a separate sh	eet /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 necessary to participate in examination hearing	•		
No, I do not wish to participate in hearing session(s)	Х	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:			
Please see cover letter for details.			



Please note the Inspector will determine the most appropriate procedure to adopt to hear those who have indicated that they wish to participate in hearing session(s). You may be asked to confirm your wish to participate when the Inspector has identified the matters and issues for examination.

Representations cannot be kept confidential and will be available for public scrutiny, including your name and/or organisation (if applicable). However, your contact details will not be published.

Data Protection

Your details will be added to our Local Plans Consultation database so that we can contact you as the review progresses. South Staffordshire Council will process your personal data in accordance with the Data Protection Act 2018 and the General Data Protection Regulations (GDPR). Our Privacy Notice can be viewed at <u>Data Protection</u> (Strategic Planning) | South Staffordshire District Council (sstaffs.gov.uk)

Please return the form via email to localplans@sstaffs.gov.uk or by post to South Staffordshire Council, Community Hub, Wolverhampton Road, Codsall, South Staffordshire WV8 1PX



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	HC1, HC2, HC3, HC4, HC8, HC10, HC12, HC13 HC14, HC17, EC12, NB1 NB2, NB4, NB6A, NB6C NB8	Policies Ma	р	
4. Do you consider the Local Plan	is :			
(1) Legally compliant	Yes	Х	No	
(2) Sound	Yes		No	Х
(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.				
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