DAVIS PLANNING **PARTNERSHIP**

CHARTERED TOWN PLANNERS

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E-Mail: mail@davisplanning.co.uk

Website:

2 1 MAY 2014

WDC PLANNING

SCANNED

CC CR PD MA PRE GEN DIS

DEVELORMENT POLICY MANAGER DEVELOPMENT SERVICES 4NO. REPS. FOR LOCAL PLAN with compliments part PBIS/14 Thanks

	Personal Details* * If an agent is appointed, please boxes below but complete the fi	2. Agent's Details (if applicable) complete only the Title, Name and Organisation full contact details of the agent in section 2.
Title		M2s
First Name		JIL
Last Name		DAVIS
Job Title (where relevant)		
Organisation (where relevant)		
Address Line 1		
Address Line 2		
Address Line 3		
Address Line 4		
Postcode		
Telephone number		
Email address		

3. Notification of subsequent stages of the Local Plan	
Please specify whether you wish to be notified of any of the following:	
The submission of the Local Plan for independent examination	Yes No
Publication of the recommendations of any person appointed	
to carry out an independent examination of the Local Plan	Yes No
The adoption of the Local Plan.	Yes No

For Official Use Only	
Person ID:	Rep ID:

5.2 Complies with the Duty to Co-operate?

5.3 Sound?

ocal Plan or SA:	LOCAL PLAN
aragraph Number:	2.13
olicy Number:	DS4
olicies Map Number:	28 - BADDESLEY CHINTON

If you answered no to quest	ion 5.3, do you consider the Local Plan and/or SA unsound because it is not
(please tick that apply):	
Positively Prepared:	
Justified:	
Effective:	
Consistent with National Police	\mathbf{v}

For Official Use Only	
Person ID:	Rep ID:

7. Please give details of why you consider the Local Plan is not legally compliant or is unsound or fails to comply with the duty 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 cooperate, please also use this box to set out your comments.

POLICY DS4 DOES NOT ACCORD WITH PRESUMPTION IN FAVOUR OF DEVELORMENT AS SET OUT IN NPPF.

Continue on a separate sheet if necessary

8. Please set out what modification(s) you consider necessary to make the Local Plan legally compliant or sound, having regard to the test you have identified at 7. above where this relates to soundness. (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 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.

DS4 (2) - ADD "GENERALLY" AFTER "THEY SHOULD" &

(7) "EXCEPTIONAL CIRCUMSTANCES"

THE CRITERIA TO BE TAKEN INTO ACCOUNT IN CONSIDERING EXCEPTIONAL CIRCUMSTANCES SHOULD BE WIDENED TO REFLECT NAPP PRESUMPTION IN FAVORR OF SUSTAINABLE DEVELOPMENT & DSS

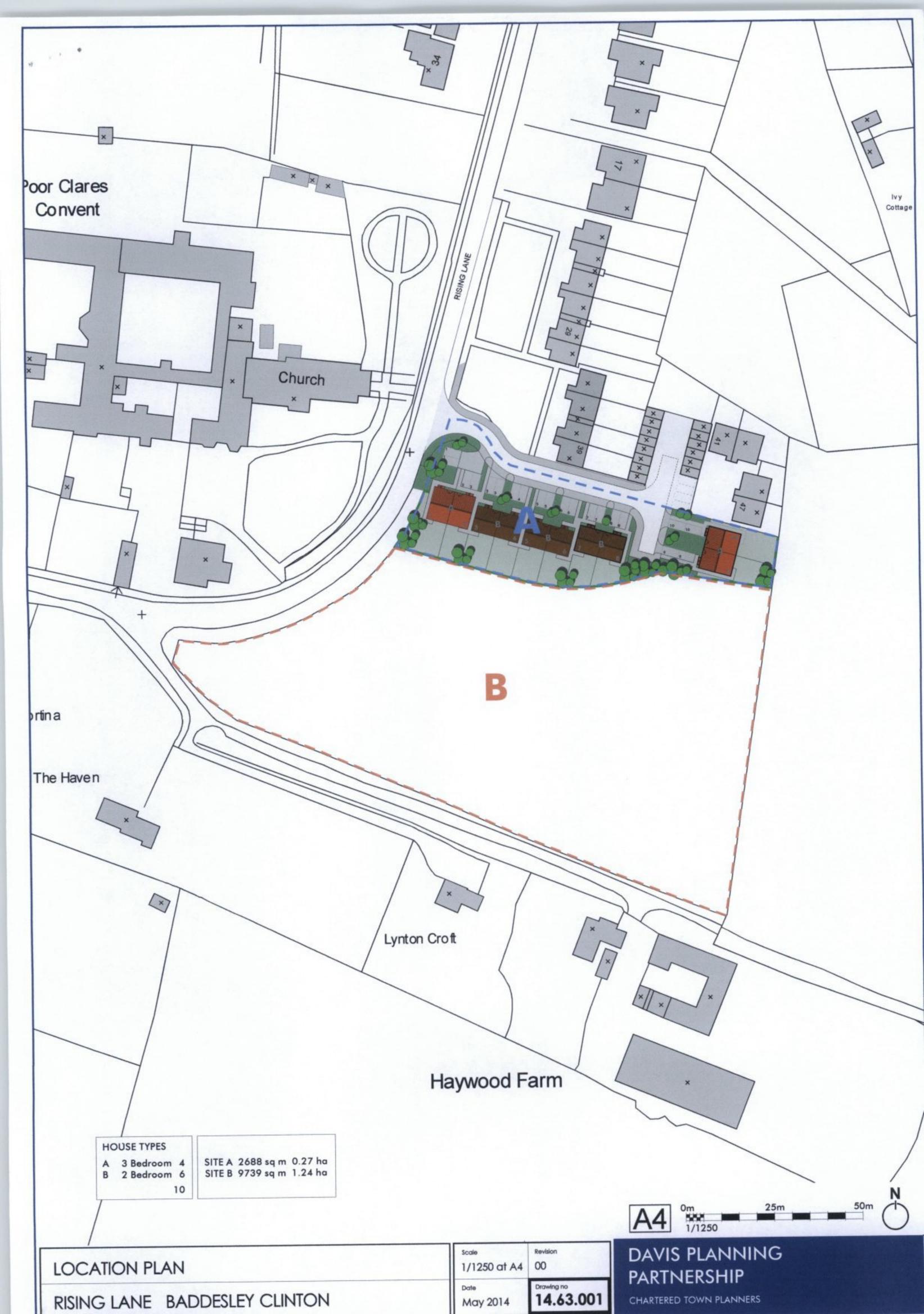
Continue on a separate sheet if necessary

Please note your representation should cover succinctly all the information, evidence and supporting information necessary to support/justify the representation and the suggested modification, as there will not normally be a subsequent opportunity to make further representations based on the original representation at publication stage.

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.

For Official	Use	Only
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9. If y	our representation is seeking a modification, do you consider it necessary to participate at the oral t of the examination?
No, I d	o not wish to participate at the oral examination
Yes, I w	rish to participate at the oral examination
10. If y	ou wish to participate at the oral part of the examination, please outline why you consider to be necessary:
	SIEE ATTACHED PLANNO 14.63.001
	MODIFICATIONS PROPOSED WOULD ALLOW
	DEVELOPMENT AS BHOWN (SEE ALSO
	REPORTENTIANO ALL OR O '
	REPRESENTATIONS ON OTHER POLICIES
	WHICH WOULD ALLOW SITE AT BADDESLEY
	CHNTON TO BE EXCLUDED FROM GREEN
	BED AN ALLOCATED ON MAP 28).
-1-0001100	e: This written representation carries the same weight and will be subject to the same scrutiny as oral tions. The Inspector will determine the most appropriate procedure to adopt to hear those who have hat they wish to participate at the oral part of the examination.
11. Deck	iration
understa be made	and that all comments submitted will be considered in line with this consultation, and that my comments will publicly available and may be identifiable to my name/organisation.
Signed:	
	20th May 2014
ate:	
ocal Plan eld on a	all the objections and supporting representations will be made available for others to see at the Council's diverside House and online via the Council's e-consultation system. Please note that all comments on the are in the public domain and the Council cannot accept confidential objections. The information will be database and used to assist with the preparation of the new Local Plan and with consideration of applications in accordance with the Data Protection Act 1998.
r Official Us	e Only
rson ID:	Rep ID:



	Personal Details* * If an agent is appointed, please boxes below but complete the factors. * If an agent is appointed, please boxes below but complete the factors. * If an agent is appointed, please boxes below but complete the factors. * If an agent is appointed, please boxes below but complete the factors. * If an agent is appointed, please boxes below but complete the factors. * If an agent is appointed, please boxes below but complete the factors. * If an agent is appointed to the factors. * If an agent is appointed to the factors. * If an agent is appointed to the factors. * If an agent is appointed to the factors. * If an agent is appointed to the factors. * If an agent is appointed to the factors. * If a complete the complete the factors. * If a complete the factors. * If a comp	2. Agent's Details (if applicable) complete only the Title, Name and Organisation full contact details of the agent in section 2.
Title		MRS
First Name		JILL
Last Name		DAVIS
lob Title (where relevant)		
Organisation (where relevant)		
Address Line 1		
Address Line 2		
Address Line 3		
Address Line 4		
ostcode		
elephone number		
mail address		

g:
Yes No
Yes No
Yes No

For Official Use Only	
Person ID:	Rep ID:

4. To which part of the Loc	cal Plan or Sustainability Appraisal (SA) does this representation relate?
Local Plan or SA:	LOCAL PLAN
Paragraph Number:	4.29
Policy Number:	H3
Policies Map Number:	28 BADDESLEY CHINTON
5. Do you consider the Loc	al Plan is:
5.1 Legally Compliant?	Yes V No
5.2 Complies with the Duty	to Co-operate? Yes No
5.3 Sound?	Yes No
(please tick that apply):	question 5.3, do you consider the Local Plan and/or SA unsound because it is not:
Positively Prepared:	
Justified:	
Effective:	
Consistent with National	Policy:

For Official Use Only	
Person ID:	Rep ID:

7. Please give details of why you consider the Local Plan is not legally compliant or is unsound or fails to comply with the duty 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 cooperate, please also use this box to set out your comments.

POLICY HIS DOES NOT ACCORD WITH PRESUMPTION IN FAVOUR OF SUSTAINABLE DEVELOPMENT AS SET OUT IN NAPF.

Continue on a separate sheet if necessary

8. Please set out what modification(s) you consider necessary to make the Local Plan legally compliant or sound, having regard to the test you have identified at 7. above where this relates to soundness. (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 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.

HE POLICY IS ONEROUS IN ITS DISCRIMINATION AGAINST ONTLINE APPLICATIONS

ONTLINE APPLICATIONS ARE PRACTICUBLE & ACTORDABLE & ASSIST IN ESTABLISHING THE PRINCIPLE OF DEVELOPMENT.

THEY CAN BE PROBLLY CONDITIONED & SUPPORTED BY REALISTIC LEGAL

AGREGMENTS

Continue on a separate sheet if necessary

Please note your representation should cover succinctly all the information, evidence and supporting information necessary to support/justify the representation and the suggested modification, as there will not normally be a subsequent opportunity to make further representations based on the original representation at publication stage.

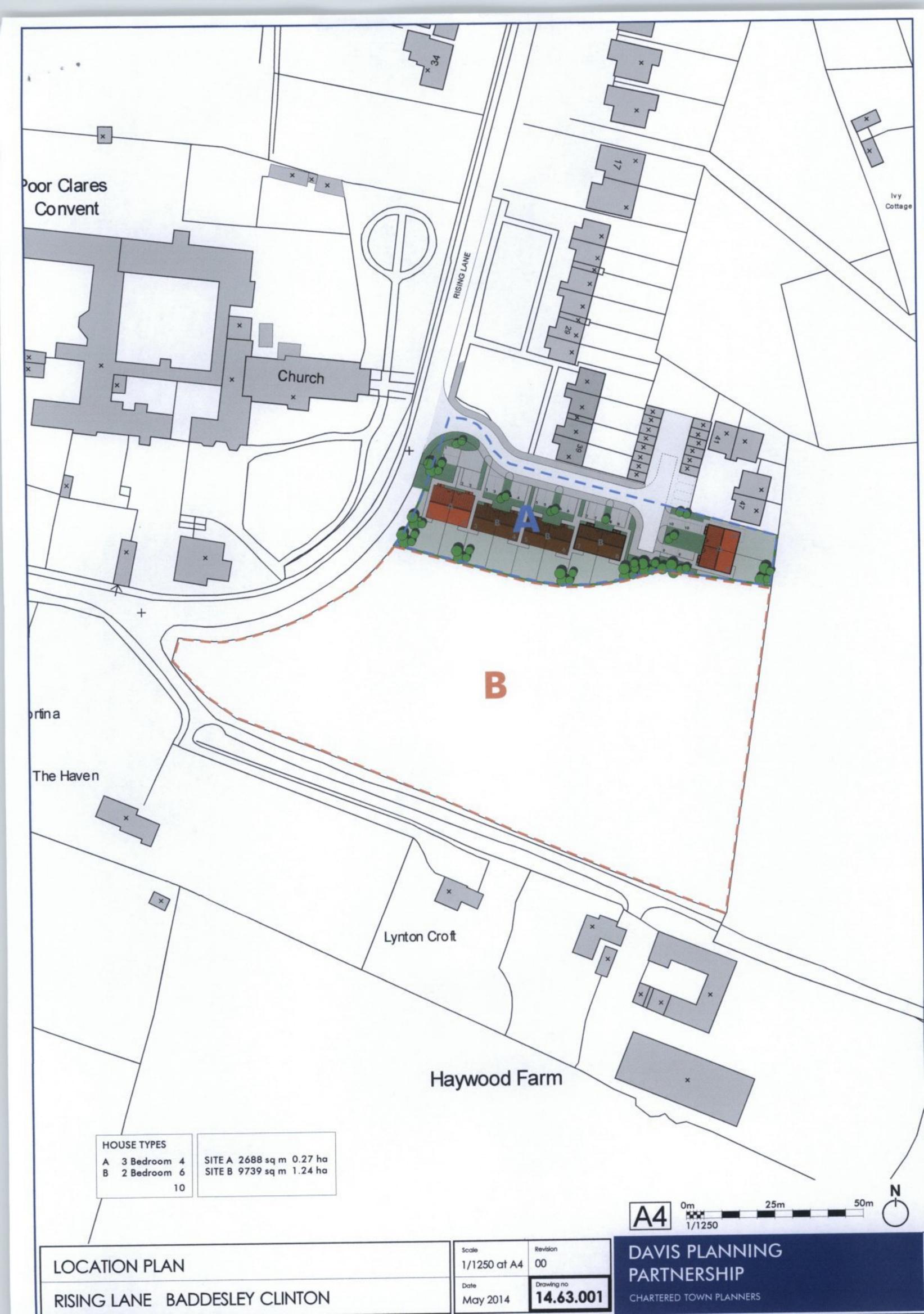
After this stage, further submissions will be only at the request of the Inspector, based on the matters and issues he/she identifies for examination.

For Official U	Jse Only
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9. If your representation is seeking a modification, do you consider it necessary to participate at the oral
part of the examination?
No, I do not wish to participate at the oral examination
Yes, I wish to participate at the oral examination
10. If you wish to participate at the oral part of the examination, please outline why you consider this to be necessary:
SEE ATTACHED PLAN NO 14.63.001 THIS SHOWS A PROPOSAL FOR BADDESIEY CLINTON WHERE THE PRINCIPLE OF DEVELOPMENT SHOULD PROPERLY DETERMINED THROUGH THE PROCESS OF AN OUTLINE APPLICATION. Continue on a separate sheet if necessary
Please note: This written representation carries the same weight and will be subject to the same scrutiny as oral representations. The Inspector will determine the most appropriate procedure to adopt to hear those who have indicated that they wish to participate at the oral part of the examination.
11. Declaration
I understand that all comments submitted will be considered in line with this consultation, and that my comments will be made publicly available and may be identifiable to my name/organisation.
Signed:
19/05/2014
Date:
Copies of all the objections and supporting representations will be made available for others to see at the Council's offices at Riverside House and online via the Council's e-consultation system. Please note that all comments on the Local Plan are in the public domain and the Council cannot accept confidential objections. The information will be held on a database and used to assist with the preparation of the new Local Plan and with consideration of planning applications in accordance with the Data Protection Act 1998.
For Official Use Only

Rep ID:

Person ID:



	Personal Details* * If an agent is appointed, please of boxes below but complete the full complete. * If an agent is appointed, please of boxes below but complete the full complete.	2. Agent's Details (if applicable) complete only the Title, Name and Organisation II contact details of the agent in section 2.
litle		MRS
First Name		JILL
ast Name		DAVIS
ob Title (where relevant)		
Organisation (where relevant)		
ddress Line 1		
ddress Line 2		
ddress Line 3		
ddress Line 4		
ostcode		
elephone number		

3. Notification of subsequent stages of the Local Plan	
Please specify whether you wish to be notified of any of the following:	
The submission of the Local Plan for independent examination	Yes No
Publication of the recommendations of any person appointed	
to carry out an independent examination of the Local Plan	Yes No
The adoption of the Local Plan.	Yes No

For Official Use Only	
Person ID:	Rep ID:

ocal Plan or SA:	LOCAL FLAN	
Paragraph Number:	4.77	
Policy Number:	H. <u>11</u>	
Policies Map Number:	28 BADDESLEY CLINTON	

5. Do you consider the Local Plan is :	
5.1 Legally Compliant?	Yes No
5.2 Complies with the Duty to Co-operate?	Yes No
5.3 Sound?	Yes No

f you answered no to question please tick that apply):	5.5, do you con	sider die Local Fic	ii unu/or 3A onsoona t	recuuse it is not.
Positively Prepared:				
Justified:				
Effective:				
Consistent with National Policy				

For Official Use Only	
Person ID:	Rep ID:

7. Please give details of why you consider the Local Plan is not legally compliant or is unsound or fails to comply with the duty 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 cooperate, please also use this box to set out your comments.

HILL - POLICY DOES NOT ACCORD WITH
PRESUMPTION IN FAVOUR OF
SUSTAINABLE DEVELOPMENT SET OUT
IN NAPPE,

Continue on a separate sheet if necessary

8. Please set out what modification(s) you consider necessary to make the Local Plan legally compliant or sound, having regard to the test you have identified at 7. above where this relates to soundness. (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 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.

TOLICY TOO RESTRICTIVE IN LIMITING DEVELOPMENT TO 2 NO DWELLINGS, POLICY INCONSISTENS WITH PURAL EXCEPTIONS POLICY WHISRE MAY NEED MORE THAN 2 DWELLINGS

POLICY SHOULD BE RELATED TO PHYSICAL TEATURES ON THE GROWN PATHER THAN AN ARBITARY NUMBER

Continue on a separate sheet if necessary

Please note your representation should cover succinctly all the information, evidence and supporting information necessary to support/justify the representation and the suggested modification, as there will not normally be a subsequent opportunity to make further representations based on the original representation at publication stage.

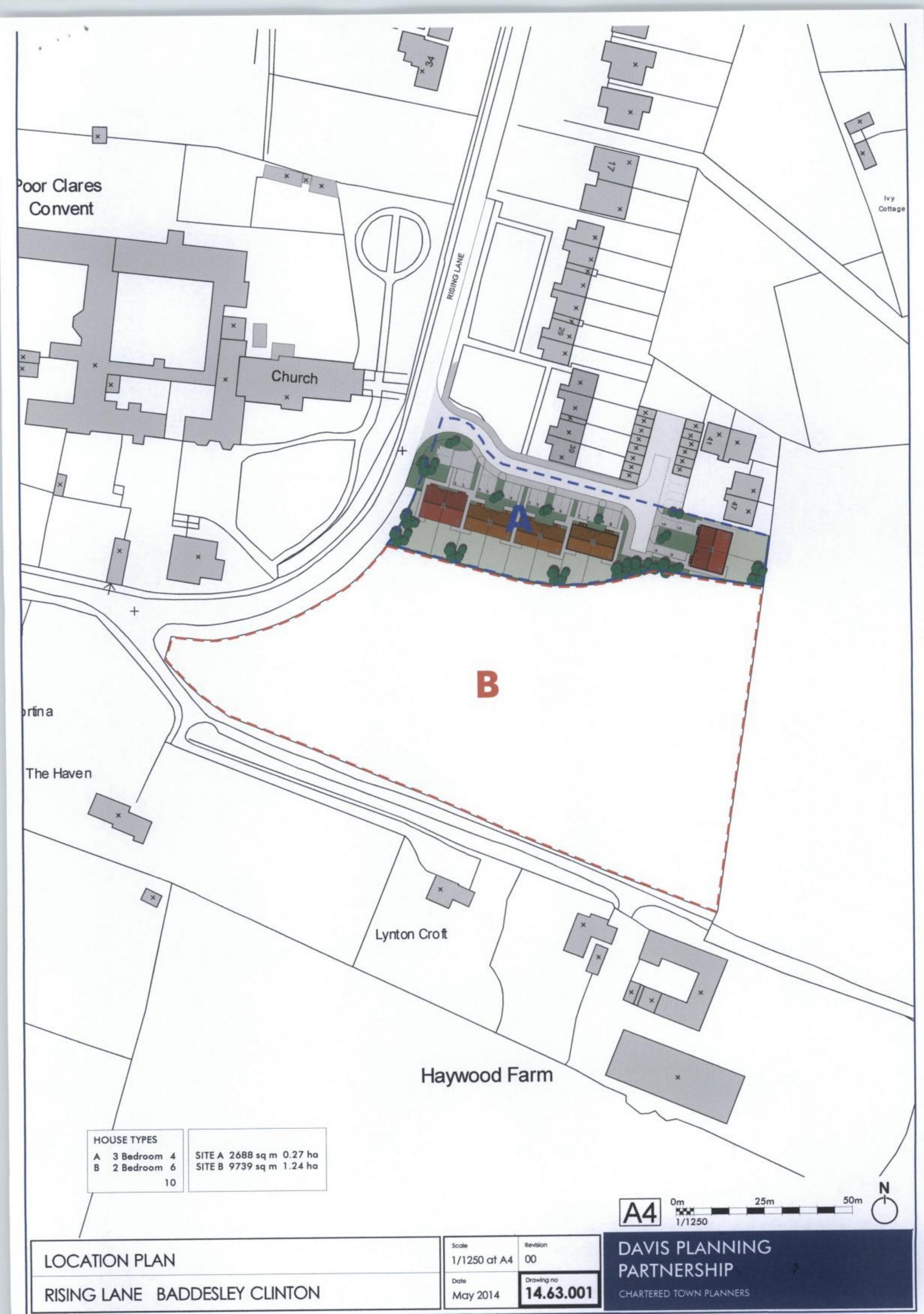
After this stage, further submissions will be only at the request of the Inspector, based on the matters and issues he/she identifies for examination.

For	Official	Use	Only
101	Official	036	Office

part of the examination?
No, I do not wish to participate at the oral examination
Yes, I wish to participate at the oral examination
10. If you wish to participate at the oral part of the examination, please outline why you consider this to be necessary:
SEE FATTACHED FLAN 14.63.601 WHICH SHOWS AN INFILL PROPOSAL FOR BADDESURY CLINTON RELATED TO
PHYSICAL FEATORES ON THE GROONS.
Continue on a separate sheet if necessary
Please note: This written representation carries the same weight and will be subject to the same scrutiny as oral representations. The Inspector will determine the most appropriate procedure to adopt to hear those who have indicated that they wish to participate at the oral part of the examination.
11. Declaration
I understand that all comments submitted will be considered in line with this consultation, and that my comments will be made publicly available and may be identifiable to my name/organisation.
Signed:
20 5 2014
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For Official Use Only

Rep ID:

Person ID:



	Personal Details* * If an agent is appointed, please composes below but complete the full	2. Agent's Details (if applicable) omplete only the Title, Name and Organisation contact details of the agent in section 2.
Title		MRS
First Name		Ju
Last Name		Davis
Job Title (where relevant)		
Organisation (where relevant)		
Address Line 1		
Address Line 2		
Address Line 3		
Address Line 4		
Postcode		
Telephone number		
Email address		

Please specify whether you wish to be notified of any of the following	70
	.g.
he submission of the Local Plan for independent examination	res No
Publication of the recommendations of any person appointed	
to carry out an independent examination of the Local Plan	Yes No
The adoption of the Local Plan.	Yes No

For Official Use Only	
Person ID:	Rep ID:

4. To which part of the Local Plan or Sustainability Appraisal (SA) does this representation relate?
Local Plan or SA: LOCAL FLAN Paragraph Number: Policy Number: DS 19 Policies Map Number: 28 BADDESCEY CUDION
5. Do you consider the Local Plan is:
5.1 Legally Compliant? Yes No
5.2 Complies with the Duty to Co-operate? Yes No
5.3 Sound?
 6. If you answered no to question 5.3, do you consider the Local Plan and/or SA unsound because it is not: (please tick that apply): Positively Prepared: Justified: Effective: Consistent with National Policy:

For Official Use Only		
Person ID:	Rep ID:	

comply with the duty 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 cooperate, please also use this box to set out your comments.
DS19 - GREEN BELT
POLICY SHOULD ALLOW FOR GREEN
BELT REVIEW TO ALLOW SUSTAIN ABLE DEVELOPMENT
Continue on a separate sheet if necessary
8. Please set out what modification(s) you consider necessary to make the Local Plan legally compliant or sound, having regard to the test you have identified at 7. above where this relates to soundness. (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 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.
TARA 1.28 (3rot Dullett Doint) Plan says that following 2009 Joint Green Bert Study Commitment made by Lovnal to review Green Bert. From should address programme for this
Plan should indicate Criteria while while lould had to exceptions & removal of long-from Green Belt such as those sures horsed in explanation & policy.
Continue on a separate sheet if necessary
Please note your representation should cover succinctly all the information, evidence and supporting information necessary to support/justify the representation and the suggested modification, as there will not normally be a subsequent opportunity to make further representations based on the original representation at publication stage. After this stage, further submissions will be only at the request of the Inspector, based on the matters and issues ne/she identifies for examination.
For Official Use Only
Person ID: Rep ID:

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	eeking a modification, do you consider it necessary to participate at the oral
part of the examination?	
No, I do not wish to participate	e at the oral examination
Yes, I wish to participate at the	oral examination
10. If you wish to participate this to be necessary:	at the oral part of the examination, please outline why you consider
GREEN 3	ACHED FRAN 14.63.001 1003 TWO SITES AT BADDELLEY WHICH COND BE REMOVED FRAM BELT DESIGNATION TO ALLOW EVELOPMENT
oresentations. The Inspector wi	necessary Intation carries the same weight and will be subject to the same scrutiny as oral all determine the most appropriate procedure to adopt to hear those who have ipate at the oral part of the examination.
1. Declaration understand that all comments	submitted will be considered in line with this consultation, and that my comments will may be identifiable to my name/organisation.
igned: 26 5 ate:	2014
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