



Representation form for Submission Version of the Epping Forest District Local Plan 2011-2033 (Regulation 19 publication)

This form should be used to make representations on the Submission Version of the Epping Forest District Local Plan which has been published. Please complete and return by 29 January 2018 at 5pm. An electronic version of the form is available at http://www.efdclocalplan.org/

| Please refer to the guidance notes available before completing this form. Please return any representations to: Planning Policy, Epping Forest District Council, Civic Offices, 323 High Street, Epping, Essex, CM16 48Z | | | | |
|---|--|--|--|--|
| | | | | |
| BY 5pm on 29 January 2018 | | | | |
| This form has two parts — Part A — Personal Details Part B — Your representation(s). Please fill in a separate sheet for each representation you wish to make. Please attach any documents you wish to submit with your representation | | | | |
| Part A | | | | |
| 1. Are you making this representation as? (Please tick as appropriate) | | | | |
| a) Resident or Member of the General Public or | | | | |
| b) Statutory Consultee, Local Authority or Town and Parish Council or | | | | |
| c) Landowner or | | | | |
| d) Agent 🗸 | | | | |
| Other organisation (please specify) | | | | |
| | | | | |

December 2017

| 2. Personal Details | S | 3. Agent's Details (if applicable) |
|----------------------------------|-------------------------------|------------------------------------|
| Title | | Mr |
| First Name | | Jonaman |
| Last Name | | Steele |
| Job Title (where relevant) | | Durector |
| Organisation (where relevant) | Cirrus Land Ltcl + LE Q Hongs | Saulles (UK) Ltd |
| Address Line 1 | Clo Asent | 2 Charlotte Place |
| Line 2 | | Southampton |
| Line 3 | | |
| Line 4 | | |
| Post Code | | SOIL DT3 |
| Telephone Number | | £ 02380 713949 |
| E-mail Address | | Istacle @ Savills.com |

| 4. To which part of the Subn (Please specify where appro | | cal Plan does this repr | resentation relate? |
|---|--|---|--|
| Paragraph | Policy | Policies Map | |
| Site Reference Se-0914 | Settlement | | + whole document. |
| 5. Do you consider this part *Please refer to the Guidance | | | |
| a) Is Legally compliant | Yes | No | |
| b) Sound | Yes | No 📝 | |
| If no, then which of the s | oundness test(s) does it | fail* | |
| Positively prepared | Effective _ | | |
| Justified | Consistent with national | policy | |
| c) Complies with the duty to co-operate | Yes | No J | • |
| | ils to comply with the du al compliance, soundnes | ty to co-operate. Pleas s of the Local Plan or | ocal Plan is not legally use be as precise as possible. If compliance with the duty to |
| Please see Au | representati | ons attached | dregarding: |
| Land east | of Chyping O | ngor. (SR- | 0914) |
| | | | |
| | | | |
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| | | | |
| | (Continue on a sepai | ate sheet if necessary) | |

| 7. Please set out what change(s) you consider necessary to make the Submission Version of the Local Plan legally compliant or sound, having regard to the test you have identified in the question above (Positively prepared/Justified/Effective/Consistent with National Policy) where this relates to soundness. You will need to say why this change will make the Submission Version of 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. | | | | |
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| (Continue on a separate sheet if necessary) | | | | |
| 8. 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 hearings Yes, I wish to participate at the hearings | | | |
| | | | | |

| 9. If you wis | h to participate at the hearings, please outline why you consider this to be necessary: |
|-----------------|---|
| only | representations highlight substantial concerns the emerging Local plan which can be fully appreciated through participation e examination hearings. |
| ndicated that t | Inspector will determine the most appropriate procedure to adopt to hear those who have hey wish to participate at the oral part of the examination. It us know if you wish to be notified when the Epping Forest District Local Plan is submitted |
| for independ | ent examination (Please tick) |
| 11. Have you | attached any documents with this representation? |
| Yes | No No |
| iignature: | Date: 29/01/2018 |
| | |

