



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/

	turn any representations to: Planning Policy, Epping Forest District Council, Civic Offices, 323 et, Epping, Essex, CM16 4BZ
Or email t	hem to: LDFconsult@eppingforestdc.gov.uk
BY 5pm o	n 29 January 2018
	has two parts –
Part A — Part B —	Personal Details Your representation(s). Please fill in a separate sheet for each representation you wish to make.
Please at	ach any documents you wish to submit with your representation
Please at	
Part .	
Part	4
Part . 1. Are yo a) Resider	ou making this representation as? (Please tick as appropriate)
Part . 1. Are yo a) Resider	ou making this representation as? (Please tick as appropriate) It or Member of the General Public or Try Consultee, Local Authority or Town and Parish Council or
Part and 1. Are your and Resider b) Statuto	ou making this representation as? (Please tick as appropriate) It or Member of the General Public or It or Consultee, Local Authority or Town and Parish Council or Iner or

December 2017

2. Personal Details		3. Agent's Details (if applicable)
Title	Mr	Miss
First Name	Mark	Jessica
Last Name	Smith	McSweeney
Job Title (where relevant)		Associate Partner
Organisation (where relevant)		Carter Jonas
Address Line 1		One Chapel Place
Line 2		London
Line 3		
Line 4		
Post Code		W1G 0BG
Telephone Number		020 7518 3200
E-mail Address		Jessica.McSweeney@carterjonas.co.uk

Part B – If necessary please complete a separate Part B form for each representation

4. To which part of the Submission Version of the Local Plan does this represer (Please specify where appropriate)	tation relate?
Paragraph Policy Policies Map	
Site Reference SR-0601 Settlement	
5. Do you consider this part of the Submission Version of the Local Plan: *Please refer to the Guidance notes for an explanation of terms	
a) Is Legally compliant Yes No	
b) Sound Yes No	
If no, then which of the soundness test(s) does it fail*	
Positively prepared Effective	
Justified Consistent with national policy	
c) Complies with the duty to co-operate	
6. Please give details of why you consider the Submission Version of the Local compliant, is unsound or fails to comply with the duty to co-operate. Please be you wish to support the legal compliance, soundness of the Local Plan or compliance, please also use this box to set out your comments	as precise as possible. If
Please see attached covering letter of consultation representations.	
(Continue on a separate sheet if necessary)	

(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.				
PLease see attached covering letter of consultation representations				
(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				

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

9. If you wish to participate at the hearings, please outline why you consider this to be necessary:
Given the strategic importance of this site to our client's portfolio, and given the number of issues to discuss, we consider it important to represent our client's interest in person.
Please note 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.
10. Please let us know if you wish to be notified when the Epping Forest District Local Plan is submitted for independent examination (Please tick)
✓ Yes No
11. Have you attached any documents with this representation?
✓ Yes No
Signature: 29/01/2018