

Wiltshire and Swindon Waste Site Allocations Development Plan Document (DPD)

Publication Stage Representation Form and Notes

Ref:

(For official use only)

Please return to Wiltshire Council, by 5pm on Monday 8th August 2011.

By post to: Minerals and Waste Policy Team, Spatial Planning, Economy and Enterprise, Wiltshire Council, County Hall, Bythesea Road, Trowbridge, Wiltshire, BA14 8JN.

By e-mail to: mineralsandwastepolicy@wiltshire.gov.uk

Tel: 01225 713223

Website: www.wiltshire.gov.uk/wastesiteallocations

This form has two parts:

Part A – Personal details

Part B – Your representation(s). Please use a separate sheet for each representation.

Part A – Personal details

*if an agent is appointed, please fill in your Title, Name and Organisation but the full contact details of the agent must be completed.

	1. Personal details	2. Agent's details (if applicable)*
Title		
First name		
Last name		
Job title (where relevant)		
Organisation (where relevant)		
Address Line 1		
Address Line 2		
Address Line 3		
Address Line 4		
Postcode		
Telephone Number		
Email Address		

Part B – Please use a separate sheet for each representation

Please note your representation should cover succinctly all the information, evidence and supporting information necessary to support/justify the representation and the suggested change, 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.

Name or organisation:	
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3. To which part of the DPD does this representation relate?

Paragraph:	Table:	Map:	Other:
Site:			

4. Do you consider the DPD is:

(i) Legally compliant	Yes:			No:	
(ii) Sound	Yes:			No:	
If you have entered No to 4 (ii), please continue to Q5. In all other circumstances, please go to Question 6.					

5. Do you consider the DPD is **unsound** because it is not:

(1) Justified	
(2) Effective	
(3) Consistent with national policy	

6. Please give details of why you consider the DPD is not legally compliant or is unsound. Please be as precise as possible.

If you wish to support the legal compliance or soundness of the DPD, please also use this box to set out your comments.

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

7. Please set out what change(s) you consider necessary to make the DPD legally compliant or sound, having regard to the test you have identified at 5 above where this relates to soundness. You will need to say why this change will make the DPD legally compliant or sound. It will be helpful if you are able to put forward your suggested revised wording of any proposal or text. Please be as precise as possible.

<i>(Continue on a separate sheet/ expand box if necessary)</i>
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8. If your representation is seeking a change, 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
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9. If you wish to participate at the oral part of the examination, please outline why you consider this to be necessary.

<i>(Continue on a separate sheet/ expand box if necessary)</i>
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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.

Signature:		Date:	
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