

Clyst Honiton Neighbourhood Plan

Submission Version Representation Form

The Clyst Honiton Neighbourhood Plan has been prepared by Clyst Honiton Parish Council.

It has now been formally submitted to East Devon District Council who are legally required to undertake public consultation. The consultation closes at midnight on **12th April 2024**.

Please use this form to make representations (comments) on the Plan.

Using this form

Please use a separate form for each representation you wish to make and state your name or organisation on each page. Please note we cannot accept anonymous responses. Your name, address and your comments will be made publically available on our website. Other personal details (signature, personal email address and telephone number) will not be visible.

Return your completed form(s) and any additional information to East Devon District Council:

By email: planningpolicy@eastdevon.gov.uk

By post: Angela King, Planning Policy team, East Devon District Council, Blackdown House, Border Road, Heathpark Industrial Estate, Honiton, EX14 1EJ

Please note representations received after 12th April 2024 will not be accepted.

Data Protection

Any personal information which you provide will be held and used by East Devon District Council for the purpose of producing the neighbourhood plan and may inform other Planning Policy work. Your information may also be shared within East Devon District Council for the purposes of carrying out our lawful functions. The content of your representation including your name and address will be recorded electronically and made available our website. Otherwise your personal information will not be disclosed to anybody outside East Devon District Council without your permission, unless there is a lawful reason to do so, for example disclosure is necessary for crime prevention or detection purposes. Your information will be held securely and will not be retained for any longer than is necessary. There are a number of rights available to you in relation to our use of your personal information, depending on the reason for processing. Further detail about our use of your personal information can be found in the Neighbourhood Planning Representations Privacy Notice on the data protection pages on our website.

Part A - Personal Details

Please enter your details as appropriate below. Please note your full name and address must be provided as a minimum. Please see page 1 for details on how we use your data.

| Your Personal Details | 5 |
|-----------------------------|---|
| Title: | |
| First name: | |
| Last name: | |
| Job Title (where relevant): | |
| Address: | |
| Postcode: | |
| Telephone number: | |
| Email address: | |
| | please fill in your title, name and organisation above and the gent below. Where applicable, an agent will be the point of lence. |
| Title: | |
| First name: | |
| Last name: | |
| Job Title (where relevant): | |
| Address: | |
| Postcode: | |
| Telephone number: | |
| Email address: | |

Part B - Representation Details

| Enter Your Name/Organisation in the box below (Please state this on each sheet): |
|--|
| |
| Question 1 |
| To which section of the Neighbourhood Plan does this representation relate? |
| Please state in the box below, the point of reference for your representation (this means the policy, paragraph number or other reference as appropriate) |
| |
| Question 2 |
| Please use the box below to explain why you are supporting or objecting to this part of the plan. If your comment relates to a specific area of land or site please identify it on a map if possible. Continue on a separate sheet if necessary. |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |

| Enter Your Name/Organisation in the box below (Please state this on each sheet): | |
|---|---|
| | |
| | |
| Question 3 | |
| Please use the box below to say what changes you would suggest should be made to the plan? | |
| It will be helpful if you are able to put forward your suggested revised wording of any policy or text or suggested alternative policy boundary as appropriate. Please be as precise as possible and continue on a separate sheet if necessary. | , |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |

| Enter Your Name/Organisation in the box below (Please state this on each sheet): |
|---|
| |
| Question 4 |
| If your representation is seeking a change to the Plan, do you consider it necessary to speak at the examination? |
| Please note if you select 'No' your representation(s) will still be fully considered by the independent Planning Inspector by way of written representations. |
| Please select as appropriate: |
| No, I do not wish to speak at the examination |
| Yes, I wish to speak at the examination |
| If you have answered yes above and wish to speak at the examination, please outline in the box below why you consider this to be necessary: |
| |
| |
| |
| |
| |
| |

Please note this will not be regarded as a binding decision but will help us in our planning of the examination. The Inspector will ultimately determine the most appropriate procedure to adopt to hear those who have indicated that they wish to participate in the examination. If the Examiner does not consider it necessary to hold a public examination, consideration will be given by way of written representations.

Future Correspondence

Please indicate by selecting yes or no as appropriate, whether you wish to be notified of:

- The publication of the recommendations of any person appointed to carry out an independent examination of the Clyst Honiton Neighbourhood Plan? Y
- 2. The adoption of the Clyst Honiton Neighbourhood Plan? Y

| Enter Your Name/Organisation in the box below (Please state this on each sheet): | |
|--|--|
| | |
| Signature | |
| Please sign and date your form in the box below. | |
| Please note a signature is required by the Planning Inspectorate. If filling in the form electronically it can be an 'electronic signature' by typing in your name in the box. If you provide a handwritten signature we will ensure that it is not published on-line but it will be visible on the paper copies available at our offices and sent to the Inspector. | |
| Signature: | |
| Date: | |