



## Solihull MBC Local Plan DPD Regulation 27 Publication Document Response Form

For Office Use Only:	
Date	
Ack	
Ref	

Solihull MBC is seeking your comments on the draft Local Plan DPD. At this stage of preparation of the DPD we are only able to accept representations about whether the document is a) legally compliant and b) sound. Further guidance on completing this form can be downloaded at [www.solihull.gov.uk/ldf](http://www.solihull.gov.uk/ldf).

This form has two parts:

Part A - Personal Details

Part B - Your representation(s).

This form will be used as a formal representation of your support or objection to the draft Local Plan DPD. Please fill in a separate Part B form for each comment you wish to make, and attach to Part A.

### PART A: PERSONAL CONTACT DETAILS

1. YOUR DETAILS		2. AGENT DETAILS (*if applicable)
Title		
Forename		
Surname		
Job Title		
Organisation		
Address		
Postcode		
Email address		
Telephone No.		
Mobile No.		

Which is your preferred method of contact?	Email		Post	
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**How we will use your personal information:** *The information you provide will be used by the Council to help prepare the Local Development Framework (LDF) and will be shared with other employees or agencies (such as the Planning Inspectorate) who may be involved with the LDF. Additionally, your personal details may be shared with other Solihull MBC departments and partner organisations to ensure our records are kept accurate and to keep you informed of future consultation documents. Please note that the Council is obliged to make representations available for public inspection, this means that with the exception of telephone numbers, email addresses and signatures, your comments and other personal details that you provide will be publicly available for inspection at the Council's principle offices and will also be published on the internet. Should you have any further queries please contact Spatial Planning on 0121 704 6395.*

**PART B: YOUR REPRESENTATION**

<b>Name</b>		<b>Organisation</b>	
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Please fill in the questions below and clearly explain your comments in the relevant sections. **Use one form per comment.** Further sheets are available to download and you may use as many additional sheets as necessary.

**Q1. Which part of the Draft Local Plan DPD does your comment relate to?**

Chapter Number		Page Number	
Policy Number		Paragraph Number	

**Q2. Do you wish to support or object to this part of the Draft Local Plan DPD?**

Support		Object	
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**Q3a. Do you consider this part of the Draft Local Plan DPD is:**

Legally Compliant?	Yes		No	
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**Q3b. Please use this space to explain your answer above. Please be as precise as possible.**

**Q3c. Please set out what change(s) you consider necessary to make the DPD legally compliant and give your reasons. 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.**

**Q4a. Do you consider this part of the Draft Local Plan DPD is:**

Sound?	Yes		No	
<b>Q4b. If you consider the draft Local Plan DPD is unsound, please identify which test of soundness your representation relates to by placing a cross by the appropriate box.</b>				
<b>Please select</b>	<b>Test of Soundness</b>			
	The strategy is not <b>justified</b> in that it is not founded on a robust and credible evidence base and/or is not considered the most appropriate strategy when considered against the reasonable alternatives.			
	It is not <b>effective</b> in that the document is not deliverable, flexible or suitable for monitoring.			
	It is not <b>consistent with national policy</b> .			
<b>Q4c. Please use this space to explain your answer to Q4a above. Please be as precise as possible.</b>				
<b>Q4d. If you consider the draft Local Plan DPD unsound, please set out what change(s) you consider necessary to make the DPD sound and give your reasons. 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.</b>				

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

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

<b>Q5. Can your representation seeking a change be considered by written representations or do you consider it necessary to participate in person at the examination?</b>				
Written representations		Participate at the Examination in Public		
<b>Q5. If you wish to participate at the oral part of the examination, please outline why you consider this to be necessary:</b>				
<b>Are you attaching any additional sheets that relate to this representation?</b>	<b>No</b>	<b>Yes</b>	<b>No. of sheets</b>	
<b>Signed:</b>		<b>Date:</b>		

**All representations must be received at the email or postal address given on this form by 5pm on Monday 5<sup>th</sup> March 2012. Late representations cannot be accepted.**

Completed Forms should be sent to the Spatial Planning team at:

Email: **sustainabledevelopment@solihull.gov.uk**

Post: **Spatial Planning  
Solihull Council  
PO Box 19  
Solihull  
B91 9QT**

<b>Please tick this box if you DO NOT wish to be notified when the Local Plan DPD is submitted, upon publication of the Inspector's Report and Adopted or be involved in the preparation of future plans and policies.</b>	
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Additional copies of this form can be accessed from the Local Development Framework webpage at [www.solihull.gov.uk/ldf](http://www.solihull.gov.uk/ldf). If you have any further queries, please contact the Spatial Planning team on 0121 704 6395.

**Thank you for taking the time to complete this representation.**