



Colchester Focused Local Plan Review Modifications Consultation

The Local Plan Focused Review was submitted to the Planning Inspectorate on 31 October 2013. A number of modifications are considered necessary to make the Focused Review document sound and legally compliant and these are now subject to a period of formal public consultation.

The Modifications are subject to public consultation from Monday 11 November until 12:00 noon on Monday 23 December 2013.

Contact Details

Title: Name:
Organisation (if relevant):
Address:
.....
Post Code:
Telephone No:
Email:

Agent Details (if applicable)

Agent's Name:
Job Title:
Address:
.....
Post Code:
Telephone No:
Email:

1. If you have not already informed the Council of your wish to appear at the examination hearing sessions, do you now wish to attend the examination as a result of the modifications consultation?

Yes ☐ No ☐

2. Do you wish to be informed of the Inspector's Recommendations?

Yes ☐ No ☐

3. Do you wish to be informed of the adoption of the Focused Review?

Yes ☐ No ☐

4. Do you have any comments on the proposed modifications, taking into consideration paragraph 182 of the National Planning Policy Framework which sets out the tests of ‘soundness’:

Positively prepared	<input type="checkbox"/>
Justified	<input type="checkbox"/>
Effective	<input type="checkbox"/>
Consistent with national policy	<input type="checkbox"/>

Please make clear what modification(s) you are referring to (policy/paragraph)

5. Do you have any other comments in relation to the modifications proposed? *Please note – comments should only be made in relation to the modifications proposed in the Modifications Schedule published.*

Continue on a separate sheet if necessary

Signature.....Date.....

I understand that my full response will be considered by Colchester Borough Council and the Planning Inspectorate in line with this consultation and that my comments will be made publicly available and identifiable to my name and/or organisation. The information in this form is, to the best of my knowledge, correct.

Thank you for completing this representation form. Your response will be sent to an Independent Examiner appointed by the Planning Inspectorate who will consider it as part of the Local Plan Focused Review Examination.

Representation forms should be returned before **12.00 noon on Monday 23 December** to planning.policy@colchester.gov.uk or alternatively via post to:

**Spatial Policy, Commercial Services, Colchester Borough Council,
FREEPOST RLST-ZTSR-SGYA, Colchester, Essex, CO3 3WG.**

If you have any queries or questions about the modifications consultation or any aspect of the Local Plan Focused Review Examination please contact a member of the Spatial Policy Team on 01206 282473 / 282476 / 282596 / 282480 or alternatively email planning.policy@colchester.gov.uk



MONITORING QUESTIONS

The following questions are optional and will help us ensure that we are including all sectors of the community. All information collected with regards to ethnicity, age and gender will be separated from your comments and will only be used by the Council for monitoring purposes.

Please tick those boxes relevant.

Postcode:

Age

- | | |
|---------|--------------------------|
| 0 – 19 | <input type="checkbox"/> |
| 20 – 39 | <input type="checkbox"/> |
| 40 – 59 | <input type="checkbox"/> |
| 60 – 79 | <input type="checkbox"/> |
| 80+ | <input type="checkbox"/> |

Gender

- | | |
|--------|--------------------------|
| Male | <input type="checkbox"/> |
| Female | <input type="checkbox"/> |

Ethnic Group

- | | |
|------------------------|--------------------------|
| Asian or Asian British | <input type="checkbox"/> |
| Black or Black British | <input type="checkbox"/> |
| Chinese | <input type="checkbox"/> |
| Mixed | <input type="checkbox"/> |
| White | <input type="checkbox"/> |
| Other Ethnic Group | <input type="checkbox"/> |

Disability

Do you have a long-term illness, health problem or disability which limits your daily activities?

- | | |
|-----|--------------------------|
| Yes | <input type="checkbox"/> |
| No | <input type="checkbox"/> |

If you have any questions or enquiries about any element of the representation form then please feel free to contact a member of the Spatial Policy Team on 01206 282473 / 282476 / 282596 / 282480 or alternatively email planning.policy@colchester.gov.uk