

## Suggested Modifications - Proposed Submission Policies, Sites and Places (PSP) Plan June 2016

The Council is inviting comments on the Suggested Modifications to the submitted Policies, Sites and Places Plan (PSP Plan). The suggestions cover policies, supporting text, Local Green Space designations and the Policies Map.

All comments received by 7pm on the 6<sup>th</sup> January 2017 will be passed to the Inspector for consideration as part of the examination process.

The Suggested Modifications (including reference code) are available to view in this document:

- [Suggested Modifications \(November 2016\) to the Policies Sites and Places Plan Proposed Submission \(June 2016\) \(OS1\)](#)

Further details can be found in the following documents:

- [Appendix I – Suggested Modifications PSP Plan \(November 2016\) \(OS1a\)](#),
- [Appendix II - Suggested Modifications Local Green Space Designation \(November 2016\) \(OS1b\)](#), and
- [Appendix III Suggested Modifications \(November 2016\) to Policies Map Changes \(June 2016\) \(OS1c\)](#)

All these documents can be viewed online at: [www.southglos.gov.uk/PSPsubmission](http://www.southglos.gov.uk/PSPsubmission)

### Making Comments

All comments should be made using this response form below. A [guidance note](#) for completing this form is available from: [www.southglos.gov.uk/PSPsubmission](http://www.southglos.gov.uk/PSPsubmission). Completed forms should be submitted to the Council using the contact details below.

Email:	<a href="mailto:planningLDF@southglos.gov.uk">planningLDF@southglos.gov.uk</a>
Post:	Strategic Planning Policy & Specialist Advice Team Environment and Community Services Department PO Box 299 Civic Centre Bristol BS15 0DR

If you have any questions regarding this invitation to make comment or would like any further information, please contact the Strategic Planning Policy & Specialist Advice Team on 01454 863464.

Comments should only be submitted once i.e. by email or by post.

**All comments must be received by no later than 7.00pm on 6<sup>th</sup> January 2016.**

Receipt of your response will be acknowledged.

**Please note that all comments must refer to the relevant suggested modifications reference, local green space reference or policy map.**

## **PART ONE- YOUR DETAILS**

Please be aware that anonymous forms cannot be included and that in order for you to submit your form you **must** include your details below.

The information collected as part this consultation will also be used by the Council in accordance with the data protection principles in the Data Protection Act 1998. The purposes for collecting this data are: to assist in plan making; and to contact you, if necessary, regarding the planning consultation process. Some of the data may be made public as it will form part of the evidence base used to inform the creation of planning policy documents. The above purposes may require public disclosure of any data received on the response form, in accordance with the Freedom of Information Act 2000.

**Should you wish to make more than one comment, please submit a separate form for each in Part Two below clearly stating which suggested modification, Local Green Space Designation or Policy Map change you wish to comment on. (N.B. You only need to complete Part One (Your Details) once)**

In circumstances where there are individuals/ groups/ organisations who share a similar view as to how the plan should change, it would be helpful if individuals/ groups/ organisations make a single response. It would also be useful if the group/ organisation state how many people the submission is representing and how the comment was authorised.

<b>Your Details</b>	<b>Your Agent's Details (If applicable)</b>
Reference No (if known*):	Reference No (if known*):
Title: Mr / Mrs / Miss / Ms / Dr / Other:	Title: Mr / Mrs / Miss / Ms / Dr / Other:
Surname: Georgiou	Surname:
Forename: Andrew	Forename:
Organisation / Company:	Organisation / Company:
Address: ██████████ ██████████ ██████████  Postcode: ██████████	Address:   Postcode:
Contact No: ██████████	Contact No:
Email: ██████████	Email:

\*If you have been contacted by post, you will find your reference number at the top of the letter under 'Our Ref'

## **PART TWO - YOUR COMMENTS**

Please use a separate form for each comment made.

<b>Q1. To which suggested modifications does this comment relate?</b>	
<b>Suggested Modification - Policy Reference:</b> (e.g. SM14)	
<b>Suggested Modification Local Green Space Reference:</b> (e.g. LGS1234)	<b>LGSD087 Summers Field</b>
<b>Suggested Modification - Policy Map Reference:</b> (e.g. MAP14)	

For guidance on 'legal compliance' and 'soundness' please see the guidance note available from <a href="http://www.southglos.gov.uk/PSPsubmission">www.southglos.gov.uk/PSPsubmission</a> .
<b>Q2a. Do you consider the suggested modification is legally compliant</b>
<input checked="" type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b>
<b>Q2b. Do you consider the suggested modification is sound?</b>
<input checked="" type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>Yes, with minor changes</b> <input type="checkbox"/> <b>No</b>

<b>Q3. On what grounds do you consider the modification is <u>unsound</u>? Is it because it is <u>not</u>:</b>
<input type="checkbox"/> Positively Prepared?
<input type="checkbox"/> Justified?
<input type="checkbox"/> Effective?
<input type="checkbox"/> Consistent with National Policy?

<b>Q4. Please set out what change(s) you consider necessary to make the suggested modification legally compliant or sound. Please be as precise as possible.</b>
<b>Your suggested change should have regard to the test you have identified at Q3 above where this relates to soundness. You should state why this change will make the Policies, Sites and Places 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.</b>
I fully support the modification with allocates Summers Field in Doynton as Local Green Space (LGSD087)

*Please continue on a separate sheet if necessary*

**Q5. 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

**Q6. If you wish to participate, please outline why you feel it is necessary to participate at the oral part of the examination.**

**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.**

*Please continue on a separate sheet if necessary*

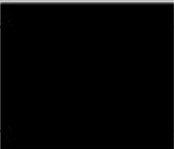
**Q7. Please indicate which, if any, of the following you wish to be notified about.**

the publication of the recommendations of the independent Inspector

the adoption of the Plan

*Please indicate as appropriate*

Signature:



Date:

06/01/2017

Thank you for your time to complete and return this comment form.  
Please keep a copy for future reference.

**All comment must be received by no later than 7.00pm on 6<sup>th</sup> January 2016.**