

Official use only
Respondent No:

**PROPOSED SUBMISSION DRAFT SOFT SAND REVIEW
OF THE WEST SUSSEX JOINT MINERALS LOCAL PLAN - REPRESENTATION FORM**

If you would like more information about the Soft Sand Review or this process, please contact the Planning Policy and Infrastructure Team at:

- Planning Services (ref Soft Sand Review), West Sussex County Council, County Hall, Chichester, PO19 1RH
- mwdf@westsussex.gov.uk
- 01243 642118

This form should be returned by **11.59pm on 2 March 2020** to the above address. Additional copies of the form can be obtained from the County Council's website: www.westsussex.gov.uk/mwdf. Photocopies of blank forms can also be made. There is also an online form available at www.westsussex.gov.uk/haveyoursay.

Late representations will not be accepted. Once the representation period closes, the Authorities will prepare to submit the review to the Secretary of State for examination, including all representations received and respondents details.

Advice on how to make representations is provided in the accompanying guidance notes. You are advised to read these before completing the form.

This form comprises of 3 main parts:

- **Part A** - Personal Details
- **Part B** - Your representation(s) – please fill in a separate sheet for each representation you wish to make. Only fill in Part A once and send all representations in together.
- **Part C** - An equalities form – this is voluntary and will be dealt with separately from Parts A and B

Data protection: Respondent details and representations will be forwarded to the Secretary of State for consideration when the Soft Sand Review is submitted for examination. All documents will be held at West Sussex County Council offices, County Hall in Chichester, and representations can be viewed by appointment and will be published online. They will be handled in accordance with the Data Protection Act 2018. West Sussex County Council is registered as Data Controller (Reg. No. Z6413427). For further details and information about our Data Controller, please see www.westsussex.gov.uk/privacy-policy. Personal contact details will be removed from copies of representations published electronically.

PART A: PERSONAL INFORMATION

A1. Personal Details

Title First Name Last Name

Job Title (where relevant)

Organisation or affiliation (where relevant)

A2. Client Details (if applicable)

If you are completing this form on behalf of someone else then please provide details of the person(s) or organisation you represent.

Title First Name Last Name

Job Title (where relevant)

Organisation or affiliation (where relevant)

A3. Contact Address Details

Please provide details of the person who should be contacted regarding this representation.

Name

Address

Telephone

Email

Preferred Method of Contact Post Email

Please tick all categories below that most adequately describe you.

<input type="checkbox"/> Resident	<input type="checkbox"/> Parish/Town Council	<input type="checkbox"/> SDNPA Member
<input type="checkbox"/> Local Business	<input type="checkbox"/> District/Borough Councillor	<input type="checkbox"/> Government Organisation
<input type="checkbox"/> Minerals or Waste Industry	<input type="checkbox"/> County Councillor	<input type="checkbox"/> Non-Government Organisation
<input type="checkbox"/> Landowner	<input type="checkbox"/> Local Authority	<input type="checkbox"/> Other (please specify) <input type="text"/>

If you submit a representation, your contact details will be used to automatically notify you of the following stages in the preparation of the Plan. Please tick the appropriate box if you **DO NOT** wish to be notified of the following:

The Soft Sand Review has been submitted for examination

Consultation on any further changes to the Review

Date of the Public Examination

Publication of the Inspector's Report

Adoption of the Soft Sand Review

Any further updates about strategic waste or minerals planning in West Sussex

PART B: REPRESENTATION

Please complete Part B for each representation that you wish to make. You only need to complete Parts A and C once.

B1. Which part of the Soft Sand Review does this representation relate to? Please use the references set out in Chapter 4 of the Proposed Submission Draft Soft Sand Review document.

SSR Reference No

B2. Do you consider the Soft Sand Review to be: (tick as appropriate). Please read Sections 2 and 3 of the Guidance Note for guidance on legal compliance and soundness.

B2.1 Legally compliant? Yes No

B2.2 Sound? Yes No

If you have ticked no to B2.2, please continue to B3, otherwise go to question B4.

B3. Do you consider the Soft Sand Review to be **unsound** because it is **not**: (tick as appropriate). Please read section 3 of the Guidance Note for an explanation of soundness.

Positively prepared

Justified

Effective

Consistent with National Policy

On the following pages, please explain why you think the review is unsound and/or not legally compliant, and set out any changes you feel should be made to the review to make it sound and legally compliant.

Please note: As there will not normally be a subsequent opportunity to make further representations based on your representation at this stage, please include all the information, evidence and supporting information necessary to support/justify your representation and the suggested change(s) to the review. After this stage, further submissions will only be invited at the request of the Planning Inspector, based on the matters and issues he/she identifies for examination.

B4. If you consider the Soft Sand Review to be unsound and/or not legally compliant, please explain why in detail and be as precise as possible. If you support the Soft Sand Review and feel it is sound and legally compliant, you can make comments to that effect.

B5. Please explain what change(s) you consider necessary to make the Soft Sand Review legally compliant and/or sound and be as precise as possible. Explain why this change will make the Soft Sand Review legally compliant and sound. It will be helpful if you are able to put forward any suggested revised wording of the policies or supporting text.

B6. Do you consider it necessary to attend and give evidence at the hearing part of the examination? (Tick as appropriate.)

No - I wish to communicate through written representations

Yes - I wish to speak to the inspector at the hearing sessions. Please answer B7.

Please note: The inspector will determine the most appropriate procedure to hear those who have indicated that they wish to participate at the hearing part of the examination.

B7. If you wish to participate at the hearing part of the examination, please outline why you consider this to be necessary.

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PART C: ABOUT YOU (THE EQUALITY ACT 2010)

To monitor the effectiveness of this consultation and help us complete our Equality Impact Report, we need to record certain personal details about the people who respond. It is for these reasons ONLY that you are asked to provide the information below which will be separated from both the respondent details and your comments; will be treated in confidence; and will be used only for statistical purposes. We are asking for this information in order to ensure that as many people as possible have a say. Information recorded on this form may be used in computerised records. Under the terms of the Data Protection Act 2018 this information will be treated in a secure and confidential manner.

You do not have to give us this information if you do not wish to do so. Each question also has an option to select "prefer not to say".

If you are **aged under 13**, please do not complete this section. If you are aged between 13 and 16, you might like to seek the advice of your parents/carers to help you complete this section.

Age

- Under 13
- 13-17
- 18-24
- 25-34
- 35-44
- 45-54
- 55-64
- 65-74
- 75-84
- 85+
- Prefer not to say

Sex

- Male
- Female
- Prefer not to say

Ethnic Origin

- White British
- White Other
- Mixed
- Black
- Asian
- Chinese
- Gypsy/Irish Traveller
- Other
- Prefer not to say

Religion

- Buddhist
- Christian (all denominations)
- Hindu
- Jewish
- Muslim
- Sikh
- Any other religion
- Unknown
- No religion
- Prefer not to say

Do you consider yourself to have a disability*

- Yes
- No
- Prefer not to say

* The Equality Act 2010 describes a person as disabled if s/he has a physical or mental impairment (including illness) which has a substantial and long-term adverse effect on that person's ability to carry out normal day-to-day activities.