**Draft Holcroft Moss Planning Obligations Joint Supplementary Planning Document (SPD):**

**Consultation Response Form**

**Comments invited until 23:59 on 12 December 2024**

**Please return the form to:**

**Email:** [spdconsultation@greatermanchester-ca.gov.uk](mailto:spdconsultation@greatermanchester-ca.gov.uk)

**Post:** Planning and Housing Team  
Greater Manchester Combined Authority  
Tootal Buildings,  
56 Oxford Street,  
Manchester  
M1 6EU

Alternatively, you can complete your representation online: <https://www.gmconsult.org/>

Please note this form has two parts:

**Part A**: Personal / Agent’s Details: need only to be completed *once (we cannot register your representation without these details).*

**Part B**: Your comments.

**Part A - Personal / Agent’s Details**

*\*If an agent is appointed, please complete only the Title, Name and Organisation boxes in (i) but complete the full contact details of the agent in (ii).*

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| --- | --- | --- |
| **Details** | **(i) Personal Details\*** | **(ii) Agents Details\*** *(if applicable)* |
| Title |  |  |
| First Name |  |  |
| Last Name |  |  |
| Organisation *(where relevant)* |  |  |
| Address Line 1 |  |  |
| Address Line 2 |  |  |
| Address Line 3 |  |  |
| Address Line 4 |  |  |
| Post Code |  |  |
| Tel. No. |  |  |
| E-mail Address |  |  |

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| --- | --- |
| **Data Protection Notice** | |
| Please note that all comments will be held by GMCA and made available in accordance with our privacy notice. For further information concerning the Holcroft Moss Planning Obligations SPD privacy notice please visit the GMCA website**.** | |
| * *Tick this box to confirm that you understand that a summary of the main issue raised in your response will be published with your full name, and that you have read and understood the Privacy Notice.* |

**2. Are you aged 13 and over?**

*Data protection laws mean that we are not allowed to store and keep the details of anyone under the age of 13. If you are under the age of 13 and would like to submit a response, please do so with the details of your carer, parent or guardian, (with their permission).*

* Yes, I am over the age of 13
* No, I am under the age of 13 and the personal details above are those belonging to my parent, carer or guardian

**Part B: Your consultation response**

Please enter your comments in the sheet below. Within your response, please include any changes to the text of the SPD which you would like us to consider. If you have any supporting documents, please clearly reference their names in your response and attach a copy of them with this form.

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Continue on additional sheets if necessary.

|  |  |  |  |
| --- | --- | --- | --- |
| **Signature** |  | **Date** |  |