| **For official use only** |  |
| --- | --- |
| **Respondent No.** |  |
| **No of Representation(s)** |  |



# Places for Everyone 2021Publication Stage Representation Form

**Comments invited until 23:59 p.m. October 3, 2021**

## Please read the guidance notes before completing this form

Please return the form to:

**E mail:** placesforeveryone@greatermanchester-ca.gov.uk

**Post:** Planning and Housing team, Greater Manchester Combined Authority,

Broadhurst House,

56 Oxford Street,

Manchester

M1 6EU

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

The submission form has 2 parts:

**Part A** – Personal / Agent’s Details: need only be completed once.

**Part B** – Your comments. Please fill in a separate sheet for each set of comments you wish to make.

## Part A

1. Personal Details: need only be completed once.

\**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)*

|  |  |  |
| --- | --- | --- |
| **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  |  |  |

## Part B - (PLEASE USE A SEPARATE SHEET FOR EACH REPRESENTATION)

### 2. To which part of Places for Everyone do your comments relate?

| Paragraph number |  |
| --- | --- |
| Policy or Strategic Allocation number |  |
| Policies map |  |
| Other (please specify) |  |

3. Do you consider the part of Places for Everyone identified above is: (tick as appropriate)

|  |  |  |
| --- | --- | --- |
| Legally Compliant? | Yes | No |
| Sound?(Is the Plan positively prepared, justified, effective, consistent with national policy) | Yes | No |
| Complies with Duty to Cooperate? | Yes | No |

### 4. Please give details of why you consider this part of Places for Everyone not to be legally compliant, is unsound or fails to comply with the duty to co-operate. *Please be as precise as possible.*

If you wish to support the legal compliance or soundness of the Local Plan or its compliance with the duty to co-operate, please give us your comments below:

### 5. Please set out the modification(s) you consider necessary to make this part of Places for Everyone legally compliant and sound, in respect of any legal compliance or soundness matters you have identified at 4 above.

(*Please note that non-compliance with the duty to co-operate is incapable of modification at examination).*

*You will need to say why each modification will make Places for Everyone legally compliant or sound. 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.*

*Please note: In your representation you should provide succinctly all the evidence and supporting information necessary to support your representation and your suggested modification(s). You should not assume that you will have a further opportunity to make submissions. After this stage, further submissions may only be made if invited by the Inspector, based on the matters and issues he or she identifies for examination.*

### 6. If your representation is seeking a modification to Places for Everyone, do you consider it necessary to participate in an examination hearing session(s)? *(Tick as appropriate)*

|  |  |
| --- | --- |
| No, I do not wish to participate in hearing session(s)  | Yes, I wish to participate in hearing session(s)  |

***Please note*** *that while this will provide an initial indication of your wish to participate in hearing session(s), you may be asked at a later point to confirm your request to participate.*

### 7. If you wish to participate in the hearing session(s), please outline why you consider this to be necessary:

 ***Please note*** *the Inspector will determine the most appropriate procedure to adopt to hear those who have indicated that they wish to participate in hearing session(s). You may be asked to confirm your wish to participate when the Inspector has identified the matters and issues for examination.*

### 8. Do you wish to be notified about (please tick):

|  |  |
| --- | --- |
| When the document is submitted for independent examination? |  |
| When the inspector’s report is published? |  |
| When the local plan is adopted? |  |

**Data protection notice:** Please note that all comments will be held by GMCA and made available in accordance with our privacy policy. For further information concerning the Places for Everyone privacy notice please visit the GMCA website.

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