

### Representation Form

# Boxgrove Neighbourhood Development Plan

The Neighbourhood Planning (General) Regulations 2012 - Regulation 16

Boxgrove Parish Council has prepared a Neighbourhood Development Plan. The plan sets out a vision for the future of the parish and planning policies which will be used to determine planning applications locally.

Copies of the Boxgrove Neighbourhood Development Plan and supporting doments are available to view on the District Council's website: http://www.chichester.gov.uk/neighbourhoodplan.

### All comments must be received by 5:00pm on 8 June 2018.

### There are a number of ways to make your comments:

- Complete this form on your computer and email it to: neighbourhoodplanning@chichester.gov.uk
- Print this form and post it to us at: Neighbourhood Planning, East Palant House, 1 East Pallant, Chichester PO19 1TY

Important Note: All comments will be publicly available, and identifiable by name and organisation (where applicable). Please note that any other personal information provided will be processed by Chichester District Council in line with the Data Protection Act 1998.

### How to use this form

Please complete Part A in full, in order for your representation to be taken inbacount at the Neighbourhood Plan examination.

Please complete Part B overleaf, identifying which paragraph your comment relates to by completing the appropriate box.

| PART A                       | Your Details  |
|------------------------------|---|
| Full Name                    | JANE BARNES   |
| Address                      | BOXIES BOXGROVE VILLAGESTORES THE STREET BOXGROVESTER |
| Postcode                     | POISONX   |
| Telephone                    |   |
| Email                        | iv  |
| Organisation (if applicable) | Boxies  |
| Position (if applicable)     | OUNER   |
| Date                         | 5/6/13  |

To which part of the document does your representation relate?

| Paragraph Number  |  | Policy Reference:                 |   |
|---|--|-----------------------------------|---|
| Do you support, oppose,   | or wish to comment o                                 | n this paragraph?(                | in in                                   |
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#### How to use this form

Please complete Part A in full, in order for your representation to be taken into account at the Neighbourhood Plan examination.

Please complete Part B overleaf, identifying which paragraph your comment relates to by completing the appropriate box.

| PART A                       | Your Details  |
|------------------------------|---|
| Full Name                    | JANE BARNES   |
| Address                      | BOXIES BOXGROVE VILLAGESTORES THE STREET BOXGROVESTER |
| Postcode                     | POISONX   |
| Telephone                    |   |
| Email                        | ,k  |
| Organisation (if applicable) | Boxies  |
| Position (if applicable)     | OUNER   |
| Date                         | 5/6/13  |

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| Paragraph Number           |                       | Policy Reference:     |                           |
|----------------------------|-----------------------|-----------------------|---------------------------|
| Do you support, oppose,    | or wish to comment o  | n this paragraph? (Pl | ease tick one answer)     |
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If you have additional representations feel free to include additional pages. Please make sure any additional pages are clearly labelled/ addressed or attached.



### Representationing

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Copies of the Boxgrove Neighbourhood Development Plan and supplements are available to view on the District Council's website: http://www.chichester.gov.uk/neighbourhoodplan.

### All comments must be received by 5:00pm online 2018.

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   Pallant, Chichester PO19 1TY

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Please complete Part A in full, in order for your representation to be the wount at the Neighbourhood Plan examination.

Please complete Part B overleaf, identifying which paragraph your combined to by completing the appropriate box.

| PART A                       | Your Details                                    |
|------------------------------|---|
| Full Name                    | TANE BARNES                                     |
| Address                      | LESS AY<br>THE STREET<br>BOXGROVE<br>CHICHESTER |
| Postcode                     | P018 OD Y                                       |
| Telephone                    |   |
| Email                        |   |
| Organisation (if applicable) | H H   |
| Position (if applicable)     |   |
| Date                         | 5/6/18  |

To which part of the document does your representation relate?

| Paragraph Number          |                          | Policy Reference:    |  |   |
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| PART A                       | Your Details                                   |
|------------------------------|--|
| Full Name                    | JANE BARNES                                    |
| Address                      | LESSAY<br>THE STREET<br>BOXGROVE<br>CHICHESTER |
| Postcode                     | P018 OD Y                                      |
| Telephone                    | v > 10   |
| Email                        | ١,٠  |
| Organisation (if applicable) | B=   |
| Position (if applicable)     |  |
| Date                         | 5/6/18   |

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|-----------------------------|--|
| Do you support, oppose,     | or wish to comment on this paragraph? (Please tick one answer) |
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