

## Response ID ANON-FS4A-CKBH-6

Submitted to **Frisby on the Wreake - Reg 16 Consultation**  
Submitted on 2017-07-01 22:13:14

### About you

#### 1 What is your name?

Name:

Trena Ball

#### 2 What is your email address?

Email:

[REDACTED]

#### 3 Please select the type of respondee you are responding on behalf of below (tick all that apply)

Resident (A)

If you selected 'B', please give additional information here, including who you represent, if applicable:

#### 4 Address

Address:

[REDACTED]

Postcode:

[REDACTED]

#### 5 If you are responding on behalf of a client or organisation, please put their address below.

Address:

Postcode:

6 All consultations are made available for public view. Personal information such as address and email will not be published with your response. Please confirm you understand and agree to this, by ticking the box below.

Yes, I agree to publish my response

### Representation 1

#### 1 Would you like to submit a representation?

Yes

#### Representation Form 1

#### 1 Please indicate which part of the submitted Neighbourhood Plan or supporting documents this representation relates.

Which document does this representation relate - (for example Submission Plan, Policy Map, etc). :

The complete Frisby on the Wreake Neighbourhood Plan.

Page Number (if applicable). :

Paragraph/Policy (if applicable) :

#### 2 Do you believe that this policy/section of the Neighbourhood Plan:

Do you believe that this Neighbourhood Plan. - Meets European obligations.:

Yes

Do you believe that this Neighbourhood Plan. - Has regard to national planning policies.:

Yes

**Do you believe that this Neighbourhood Plan. - Is in general conformity with the strategic policies of the Local Plan/Is compatible with adjoining Neighbourhood Plans:**

Yes

**Do you believe that this Neighbourhood Plan. - Contributes to the achievement of sustainable development.:**

Yes

**Do you :**

Support this policy/part of the plan

**Comments:**

I fully support the content of the Frisby on the Wreake Neighbourhood Plan, as submitted.

**Please suggest any amendments to the plan/policy here. :**

**3 Please upload a file for supporting evidence below.**

**File upload:**

No file was uploaded

## **Representation 2**

**1 Would you like to submit another representation?**

No

## **Examination**

**1 If you believe this Neighbourhood Plan should be examined through hearings, please indicate why you believe this to be necessary below.**

If you believe this Neighbourhood Plan should be examined through hearings, please indicate why you believe this to be necessary below. :

**2 Do you wish to be notified of the Council's decision to make or refuse to make the neighbourhood development plan? (Please tick one box only)**

Yes