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|  | **Consultation on Draft Planning Obligations Supplementary Planning Document (SPD)**  **December 2022**  **REPRESENTATION FORM** |
| This form should be used to make representations on the Draft Planning Obligations SPD. Consultation on the SPD will run from **Thursday 8 December 2022 to Thursday 19 January 2023**.  The form should either be returned by post to:  Draft Planning Obligations SPD  Planning Policy Team  Brentwood Borough Council  Town Hall, Ingrave Rd  Brentwood,  Essex, CM15 8AY  Or email the form to: [planning.policy@brentwood.gov.uk](mailto:planning.policy@brentwood.gov.uk)  Please note this form has two sections:  Section A – Personal information  Section B – Your representation  Please ensure you complete **both** parts of the form.  Where possible, we would prefer responses are provided using our Local Plan online consultation portal. This is the quickest and easiest way to make representations. To respond in this way, please follow this link: [**https://brentwood.oc2.uk/**](https://brentwood.oc2.uk/)  **All responses must be received by 5pm Thursday 19 January 2023**  **Data Protection**  All personal information that you provide will be used solely for the purpose of the SPD consultation. Please note whilst all addresses will be treated as confidential, comments will not be confidential. Each comment and the name of the person who made the comment will be featured on the Council’s website.  By submitting this form, you are agreeing to the above conditions. | |

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| Title |  |
| First Name |  |
| Last Name |  |
| Job Title  (if applicable) |  |
| Organisation  (if applicable) |  |
| Address |  |
| Post Code |  |
| Telephone Number |  |
| Email Address |  |

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| **Section B: Your Representation**  Please complete a separate sheet for each representation that you wish to make. You must complete ‘Part A – Personal Details’ for your representation to be accepted.  Representations cannot be treated as confidential and will be published on our Consultation Portal. Any representations that are considered libelous, racist, abusive or offensive will not be accepted. All representations made will only be attributed to your name. We will not publish any contact details, signatures or other sensitive information. |

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| Full Name |  |

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| **Comments (Support / Object / Comment)**  Please provide any comments on the draft SPD below.  If known, please state what Chapter / Paragraph number your comments relate to. |
| Please continue on a separate sheet if necessary |
| **Suggested Changes**  Please set out any change(s) you feel necessary to improve the SPD.  If known, please state what Chapter / Paragraph number your comments relate to. |
| Please continue on a separate sheet if necessary |