

(where relevant)

Solihull MBC Local PlanPublication Stage Representation Form

Ref:

(For official use only)

Name of the Local Plan relates:		
BY Monday 14 th Decemb Our Privacy Notice can be	plihull.gov.uk or Policy and Engage oer 23:59 found at https://www.solihull.gov.uk/ ment/Economy-and-Infrastructure/Po	· · · · · · · · · · · · · · · · · · ·
	need only be completed once. on(s). Please fill in a separate sheet t	for each representation you wish to m
Part A		
1. Personal Details* *If an agent is appointed, please boxes below but complete the full	complete only the Title, Name and Organisation	2. Agent's Details (if applicable) on (if applicable)
Title		Mr
First Name		Alex
Last Name		Child
Job Title (where relevant)		Planner
Organisation	McCarthy and Stone Retirement Lifestyles Ltd	The Planning Bureau Ltd
(where relevant) Address Line 1	100A Holdenhurst Road	100A Holdenhurst Road
Line 2	Bournemouth	Bournemouth
Line 3		
Line 4		
Post Code	BH8 8AQ	BH8 8AQ
Telephone Number	As agent	
E-mail Address	As agent	

Part B - Please use a separate sheet for each representation

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Name or Organisation:						
3. To which part of the Local Plan does this representation relate?						
Paragraph	Policy	P4 E	Policies	Мар		
4. Do you consider the Local Plan is :						
4.(1) Legally compliant	Y	es .	/		No	
4.(2) Sound	Y	es			No	/
4 (3) Complies with the Duty to co-operate	Ye	es [/		No	7
Please tick as appropriate						
5. Please give details of why you consider the Local Plan is not legally compliant or 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 also use this box to set out your comments.						
Policy P4E (iv) states All specialist housing must meet the Category 2, Category 3(2a) or Category 3(2b) requirements of the Building Regulations, Approved Document M, Volume 1						
This is not clear as it does not stipulate the proportion of each form of accommodation which is required and in any case should only relate to housing where the Council has nomination involvement (see other representations)						
		(Continue o	n a separate	sheet /e	xpand box i	f necessary)
6. Please set out the modification(s) you consider necessary to make the Local Plan legally compliant and sound, in respect of any legal compliance or soundness matters you have identified at 5 above. (Please note that non-compliance with						

Plan legally compliant and sound, in respect of any legal compliance or soundness matters you have identified at 5 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 the Local Plan 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.

That Policy P4E be amended to specify the proportion of wheelchair accessible and adaptable housing required and that this is only required where the Council is responsible for allocating or nominating an individual						
(Continue on a s	separate sheet /expand box if necessary)					
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.						
7. If your representation is seeking a modification to the plan, do you consider it necessary to participate in examination hearing session(s)?						
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.						
8. If you wish to participate in the hearing session consider this to be necessary:	n(s), please outline why you					
Please note that while this will provide an initial in participate in hearing session(s), you may be asked your request to participate. 8. If you wish to participate in the hearing session.	dication of your wish to ed at a later point to confirm					

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.

9. Signature: A J Child Date: 14/12/2020