Solihull MBC Local Plan Ref: **Publication Stage** Representation (For official use only) Form Name of the Local Plan to which this Solihull Local Plan Reg 19 representation relates: Please return to psp@solihull.gov.uk or Policy and Engagement, Solihull MBC, Solihull, B91 3QB BY Monday 14th December 23:59 Our Privacy Notice can be found at https://www.solihull.gov.uk/About-the-Council/Data-protection-FOI/Solihull-Council-Statement/Economy-and-In frastructure/Policy-Engagement This form has two parts -Part A – Personal Details: need only be completed once. Part B – Your representation(s). Please fill in a separate sheet for each representation you wish to make. Part A 2. Agent's Details (if ap-1. Personal Details* plicable) *If an agent is appointed, please complete only the Title, Name and Organisation (if applicable) boxes below but complete the full contact details of the agent in 2. Ms Title First Name Donna Last Name Savage Job Title (where relevant) Landowners at Jacobean Organisation DSP Lane - see reps for detail) (where relevant) Address Line 1 The Coach House Line 2 45b Rother Street Line 3 Stratford upon Avon Line 4 Warks Post Code CV37 6LT Telephone Number E-mail Address

(where relevant)					
Part B – Please sentation	use a	separa	ate she	eet for ea	ach repre-
Name or Organisation:Lar	ndowners a	at Jacobe	an Lane		
3. To which part of the Lo	cal Plan do	es this r	epresenta	tion relate?	
Paragraph		Policy	P4	Policies Map	
4. Do you consider the Lo	cal Plan is	:			
4.(1) Legally compliant	Yes	х		No	
4.(2) Sound	Yes			No	X
4 (3) Complies with the Duty to co-operate No		Yes		X	
Please tick as appropriate					
5. Please give details of w is unsound or fails to com possible. If you wish to support the compliance with the duty comments.	ply with the legal com	ne duty to opliance o	o co-opera or soundne	ete. Please be ess of the Loc	as precise as
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those who have indicate hearing session(s). You	ctor will determine the most a ed that they wish to participat ou may be asked to confirm y rs and issues for examination	e in our wish to pa		
9. Signature:	Donna Savage		Date:	14/1 2/20 20
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Name or Organisation:Landowners at Jacobean Lane

3. To which part of the Local Plan does this representation relate?							
Paragraph		Policy	P5	Policies Map			
4. Do you consider the Lo	cal Plan is	:		Мар			
4.(1) Legally compliant	Yes	x		No			
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4.(2) Sound	Yes			No	Х		
4 (3) Complies with the Duty to co-operate No							
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. Please see attached reps on behalf of Landowners at Jacobean Lane							
(Continue on a separate sheet /expand box if 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 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. Please see attached reps on behalf of Landowners at Jacobean Lane							
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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 represer		n hearing	sessior	n(s)?			
necessary to parti	cipate in examination						
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4. Do you consider the	Local Plan i	s :			
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4.(2) Sound	Yes		No	Х	
4 (3) Complies with the Duty to co-operate	е	Yes	X		

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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.					
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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(s), please outline why you consider this to be necessary:					

Please see attached reps on behalf of Landowners at Jacobean Lane						
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No, I do not wish to participate in hearing session(s)	Х	Yes, I wish to participate in hearing session(s)			
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Signature:	Donna Savage	Date:	4/20
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Part B - Please use a separate sheet for each repre-						
sentation						
Name or Organisation:Land	downers at Ja	acobean La	ne			
3. To which part of the Lo	cal Plan do	es this r	epresentat	tion relate?		
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4 (3) Complies with the Duty to co-operate No		Yes	X			
Please tick as appropriate						
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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.

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9. Signature:	Donna Savage		Date:	14/1 2/20 20		

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Part B - Please sentation	use a	separa	ate she	et for ea	ach repre-	
Name or Organisation:						
3. To which part of the Loc	cal Plan do	es this r	epresenta	tion relate?		
Paragraph		Policy		Policies Map		
4. Do you consider the Loc	cal Plan is	_ :				
4.(1) Legally compliant	Yes			No		
4.(2) Sound	Yes			No		
4 (3) Complies with the Duty to co-operate No						
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.						

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 necessary to participa				ı consider it	
No , I do r participat hearing s			pate in	sh to partici- session(s)	
Please note that while pate in hearing sessio quest to participate.					
8. If you wish to part consider this to be need		ring session(s)), please outline	e why you	
Please note the Inspector those who have indicated hearing session(s). You has identified the matters	I that they wish to pa may be asked to co	rticipate in nfirm your wish i			
0. Signaturo:			Date		
9. Signature:			Date:		
Part B – Pleas sentation	se use a sep	oarate sh	eet for ea	ch repre-	
Name or Organisation					
3. To which part of the			_		
Paragraph	Pc	olicy	Policies		

				Мар		
4. Do you consider the Lo	cal Plan is	:				
4.(1) Legally compliant	Yes			No		
4.(2) Sound	Yes			No		
4 (3) Complies with the Duty to co-operate No		Yes				
Please tick as appropriate						
5. Please give details of w is unsound or fails to compossible. If you wish to support the compliance with the duty comments.	ply with th	ne duty to pliance o	o co-opera or soundne	te. Please be ess of the Loc	as precise as al Plan or its	
(Continue on a separate sheet /expand box if 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 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.						
(Continue on a 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 i necessary to participate in					ou consider it	

	participa	not wish to ate in session(s)		Yes, I wish to pate in hearing session				
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 C	. If you wish to pa onsider this to be n	rticipate in the hearing sess ecessary:	ion(s), plea	ase outline why	you			
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:			Date:				