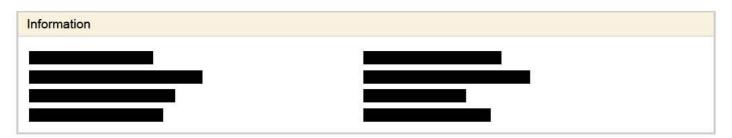
## Response 85

## **Respondent Details**



## PART A - About You

1. Please complete the following: Please note the email address (if provided below) will be sent a full copy of the submitted response and a unique ID number for future reference (pdf attachment).

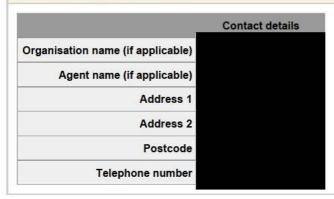
Name of person completing the form: Anais mason

Email address:

2. What type of respondent are you? Please select all that apply.

A local resident who lives in Warrington

3. Please complete the following:



## PART B - Representation Form 1

1. To which part of the Local Plan does this representation relate? From the drop down list please select one option.

Policy OS1 Burtonwood

2. Does your comment relate to a specific paragraph (s) or policy sub-number (s)? Please select one option.

None of the above

3. Do you consider the Draft Local Plan is: Please select one option in each row.

	Yes No
Legally Compliant	X
Sound	X
Compliant with the Duty to Co-operate	Х

You have just completed a Representation Form for Policy OS1 Burtonwood. What would you like to do now? Please select one option.

Complete the rest of the survey (Part C)