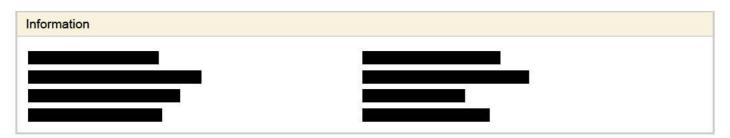
## Response 886

## **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: Diane warburton

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:

	Contact details
Organisation name (if applicable)	N/a
Agent name (if applicable)	N/a
Address 1	
Address 2	
Postcode	
Telephone number	

## 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.

Draft Local Plan (as a whole)

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		
Sound		X
Compliant with the Duty to Co-operate		

4. If you have answered 'No' to any of the options in the above question then please give details in the box below of why you consider the Draft Local Plan is not legally compliant or is unsound or fails to comply with the duty to cooperate. Please be as precise as possible.

1plan period. -15 not 20 years. 2housing numbers -govmnt methodology only starting point case is for lower numbers. 3-brown field first. Protect our green fields. 4- infrastructure local unique infrastructure presents challenges-schools health centres staffing transport. 5- local identity- may well disappear with the character and environment of the areas

You have just completed a Representation Form for Draft Local Plan (as a whole). What would you like to do now? Please select one option.

Complete the rest of the survey (Part C)