

# Foxton Neighbourhood Plan

## Response Form



This form has two parts to complete (please use black ink):

**PART A – Your Details**

**PART B – Your Response**

If you need any further information or assistance in completing this form please contact the Greater Cambridge Shared Planning Policy Team on: 01954 713183 or [neighbourhood.planning@scambs.gov.uk](mailto:neighbourhood.planning@scambs.gov.uk)

**All comments must be received by 5pm on Tuesday 28 April 2020.**

### Data Protection

We will treat your data in accordance with our Privacy Notices: [www.scambs.gov.uk/planning-policy-privacy-notice/](http://www.scambs.gov.uk/planning-policy-privacy-notice/). Information will be used by South Cambridgeshire District Council solely in relation to the Foxton Neighbourhood Plan. Please note that all responses will be available for public inspection and cannot be treated as confidential. Representations, including names, are published on our website. **By submitting this response form you are agreeing to these conditions.**

**The Council is not allowed to automatically notify you of future consultations unless you 'opt-in'.**

Do you wish to be kept informed of future stages of the Foxton Neighbourhood Plan?

Please tick: Yes  No

## PART A – Your Details

Please note that we cannot register your comments without your details.

<b>Name:</b>	<b>Agent's name:</b>
<b>Name of organisation:</b> (if applicable)	<b>Name of Agent's organisation:</b> (if applicable)
<b>Address:</b>	<b>Agent's Address:</b>
<b>Postcode:</b>	<b>Postcode:</b>
<b>Email:</b>	<b>Email:</b>
<b>Tel:</b>	<b>Tel:</b>
<b>Signature:</b>	<b>Date:</b>
<i>If you are submitting the form electronically, no signature is required.</i>	

## PART B – Your Response

For office use only

Agent number:

Representor number:

Representation number:

What part of the Neighbourhood Plan do you have comments on?	
Policy or Paragraph Number (please state)	<input type="checkbox"/>
Do you Support, Object or have Comments? (Please tick)	<input type="checkbox"/> <b>SUPPORT</b>
	<input type="checkbox"/> <b>OBJECT</b>
	<input type="checkbox"/> <b>COMMENT</b>

**Reason for SUPPORT, OBJECT or COMMENT:**  
Please give details to explain why you support, object or have comments on the Neighbourhood Plan. If you are commenting on more than one policy or paragraph, please make clear which parts of your response relate to each policy or paragraph

If you consider that the referendum boundary should be extended please outline your reasons.

**Summary of Comments:**  
If your comments are longer than 100 words, please summarise the main issues raised.

**COMPLETED FORMS MUST BE RECEIVED BY 5PM ON 28 APRIL 2020 AT:**

Email: [neighbourhood.planning@scambs.gov.uk](mailto:neighbourhood.planning@scambs.gov.uk) or post it to:

Greater Cambridge Shared Planning Policy Team  
South Cambridgeshire District Council,  
Cambourne Business Park, Cambourne,  
Cambridge, CB23 6EA