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Core Strategy Review Representation Form – Targeted Consultation

The consultation runs between Monday 15 January and 26 February 2024

For representations to be valid, a full name and address must be provided.

If you need to continue with more space for any of your answers, please attach further pages to this form.

All fields marked with an Asterix (*) must be completed.

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To wh	h part of the Core Strategy Review does this representation relate? (one or more must be
Polici	Policies Map Other text
polici	se the box below to tell us specifically where the representation relates to (a policy, the map or other text). Do not use the box to make your comments as this is required further e form.(*)
1-	NORTH OR SPONDON.
Do yo	consider the Core Strategy Review is Legally Compliant? (*)
Yes	No No
Do yo	consider the Core Strategy Review is sound?(*)
Yes	No No
Do yo	consider the Core Strategy Review complies with the duty to cooperate?(*)
Yes	No No
Please	ive details of why you consider the Erewash Core Strategy Review is not legally compliant or is

Please give details of why you consider the Erewash Core Strategy Review 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 Core Strategy Review or its compliance with the duty to co-operate, please also use this box to set out your comments.

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Please set out the modification(s) you consider necessary to make the Core Strategy Review legally compliant and sound, in respect of any legal compliance or soundness matters you have identified above. (Please note that non-compliance with the duty to cooperate is incapable of modification at examination). You will need to say why each modification will make the Core Strategy Review 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.

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I DON IT KNOW HOW YOU COLLED MAKE THIS RART OF
THE SMATERY COMPLIANT.

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.

	or representation is seeking a modification to the plan, do you consider it necessary to participate amination hearing session(s)?(*)
1	No, I do not wish to participate in hearing session(s)
	Yes, I wish to participate in hearing session(s)
sessic	e note that while this will provide an initial indication of your wish to participate in hearing on(s), you may be asked at a later point to confirm your request to participate. If you wish to cipate in the hearing session(s), please outline why you consider this to be necessary:

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

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Please use this space to continue any of your answers.

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