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|  | MELTON LOCAL PLAN – ADDENDUM OF FOCUSED CHANGES(JULY 2017) | | | For official use only |
| Respondent Ref: |
| **Date Received:** |
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| The focused changes being proposed in the Melton Local Plan have been split into the main themes that are being addressed since our last consultation in November 2016:   |  |  |  |  | | --- | --- | --- | --- | | **FOCUSED CHANGE DESCRIPTION** | **FC NUMBER** |  |  | | 1. Spatial strategy FC1.1 to FC1.3 (see schedule of the proposed focused changes) 2. Sustainable neighbourhoods FC2.1 Policy SS4 FC2.2 Policy SS5 3. Growth strategy 4. **Housing site allocations\*\*** FC4.1 Section 5.4, C1 (A) & C1 (B) FC4.2 Appendix 1 5. Housing mix 6. Affordable housing 7. Gypsies and travellers 8. Economy 9. Indoor sports & recreation 10. Infrastructure delivery plan 11. Melton transport strategy 12. Developer contributions 13. Policies map 13.1 Revised boundary of southern sustainable neighbourhood 13.2 Addition of corridor of investigation/interest for the Melton Mowbray Distributor Road | FC1  FC2   FC3 FC4   FC5 FC6 FC7 FC8 FC9 FC10 FC11 FC12 FC13 |  | **\*\*PLEASE SUBMIT 1 REPRESENTATION FORM PER FOCUSED CHANGE (FC)\*\*** | |  |   **\*\*To comment on HOUSING SITE ALLOCATIONS, please scroll down to the end of this form\*\***  To view more specific policy numbers, please refer to the relevant FC number using the reports on the website at: [www.meltonplan.co.uk/focussed-changes-to-plan](http://www.meltonplan.co.uk/focussed-changes-to-plan) | | | | | |
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**What ‘soundness’ means**

The Local Plan will be examined by an independent inspector whose role is to assess whether the plan has been prepared in accordance with the Duty to Cooperate, legal and procedural requirements, and whether it is sound. A local planning authority should submit a plan for examination which it considers is “sound” – namely that it is:

**● Positively prepared** – the plan should be prepared based on a strategy which seeks to meet objectively assessed development and infrastructure requirements, including unmet requirements from neighbouring authorities where it is reasonable to do so and consistent with achieving sustainable development;

**● Justified** – the plan should be the most appropriate strategy, when considered against the reasonable alternatives, based on proportionate evidence;

**● Effective** – the plan should be deliverable over its period and based on effective joint working on cross-boundary strategic priorities; and

**● Consistent with national policy** – the plan should enable the delivery of sustainable development in accordance with the policies in the Framework.

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Melton Borough Council proposes to submit the Melton Local Plan (MLP) to the Secretary of State of Communities and Local Government for independent examination. Before submitting the MLP, the Council is required to publish the document and invite the public to make representations on its ‘soundness’. An addendum of ‘Focused Changes’ (FC) has been published since the last consultation in November 2016, and the Council is now consulting on this addendum. The MLP, once adopted will be the development plan for Melton Borough.

This form has two parts:

* Part A: Personal Details
* Parts B and C: Your representation(s).

When making representations, **please use a separate Part B form for focused change you wish to comment on**. **Before completing the form you should read the accompanying Guide to Making Representations.** Please ensure that your representation relates to the correct test of soundness (details can be found in the Guide to Making Representations)

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| Completed forms should be returned to the address below no later than **23rd August 2017. Representations received after this deadline will not be accepted.** | | |
| Planning Policy Team  Regulatory Services Melton Borough Council Parkside, Station Approach Melton Mowbray  Leicestershire LE13 1GH |  | Alternatively, you can access this form on the Council’s website <https://www.meltonplan.co.uk/focussed-changes-to-plan> & print it out or complete it electronically and e-mail your response to [planningpolicy@melton.gov.uk](mailto:planningpolicy@melton.gov.uk)  Representations can also be made via the Council’s on-line consultation portal - <https://meltonboroughcouncil.citizenspace.com/planning-policy-team/copy-of-focussedchanges-addendum-consultation-s/> |
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| **PART A: ABOUT YOU/YOUR ORGANISATION** *(If you are an agent, please complete the personal details of your client in 1 and complete agent’s details in 2).* | | |
| **Personal Details** |  | **2. Agent's Details** *(If applicable)* |
| Full Name: |  | Full Name & Company: |
|  |  |  |
| Organisation (if applicable) |  | Organisation/Client Representations on Behalf Of |
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| Address: |  | Address: |
|  |  |  |
| Postcode: |  | Postcode: |
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| Email: |  | Email: |
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| Contact Number: |  | Contact Number: |
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| Number of Representations Enclosed: |  |  |
|  | | |
| Signature: |  |  |
|  | | |
| Date: |  |  |

(PART B)

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| **PART B: YOUR REPRESENTATION** *(This section will need to be completed for each representation made. Please photocopy or download from the council’s website Part B of the form as required.)* | | | | | | | | | | | | | | | | | | | | | | |
| **Which part of the Melton Local Plan: focused changes addendum does your representation relate to?** *(Please enter the policy number)* | | | | | | | | | | | | | | | | | | | | | | |
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| FC number: |  | | |  | | Policy number: | | | | |  | | | |  |  | | |  | |  | |
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| **Do you believe that this policy/section of the Melton Local Plan focused change is?** *(Please tick the appropriate box)* | | | | | | | | | | | | | | | | | | | | | | |
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| 1. Legally Compliant: | | | | | **Yes** | |  |  | | **No** | | |  |  | | | | | |  | | |
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| 2. Sound: | | | | | **Yes** | |  |  | | **No** | | |  |  | | | | | |  | | |
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| 3. Complies with Duty to Co-operate: | | | | | **Yes** | |  |  | | **No** | | |  |  | | | | | |  | | |
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| *\*The considerations in relation to the Local Plan being "sound" are explained in paragraph 182 of the National Planning Policy Framework. If you have entered “No” in relation to 4(2), please go to question 5. In all other circumstances, please go to question 6* | | | | | | | | | | | | | | | | | | | | | | |
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| **Do you consider that the focused change is unsound because it is not any of the following?** *(Please tick the appropriate box)* | | | | | | | | | | | | | | | | | | | | | | |
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| 1. Positively Prepared | |  | 1. Justified | | | | | |  | | | 1. Effective | | | | |  | 1. Consistent with National Policy | | | |  |
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| **Please give details of why you consider this focused change 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 this policy or its compliance with the Duty to Co-operate, please use this box to set out your comments.** *(Please continue onto a separate sheet if you require more space)* | | | | | | | | | | | | | | | | | | | | | | |
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| **Please set out what change(s) you consider necessary to make the focused change legally compliant or sound, having regard to the test you have identified at 5 above where this relates to soundness. (NB Please note that any non-compliance with the duty to co-operate is incapable of modification at examination).** **You will need to say why this change will make the suggested focused change 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 continue onto a separate sheet if you require more space)* | | | | | | | | | | | | | | | | | | | | | | |
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| FC4 HOUSING SITE ALLOCATIONS COMMENTS The following questions will relate to housing site allocations. Please only use 1 form for each site you wish to submit a comment on. You may copy this page for additional site representations.  Please note: site references may have changed since the previous Local Plan edition, so please use this document to quote any references to sites:   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **Table 1: Schedule and Summary of the proposed Focused Changes FC4: Housing site allocations, reserve sites and site specific policies** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **FC4.1** | Section 5.4  Policy C1(A)  Policy C1(B) | | | Reflecting and referencing the findings on suitability, sustainability, site capacity, availability and deliverability, which are set out in updated site and sustainability assessment work.  Affects the reasoned justification and policy on housing allocations overall and the associated site specific policies and preamble. Includes deletions, additions, revised site boundaries and capacities, and some recategorisation. | | | | | | | | | | | | | | | - 11 site allocations deleted  - 3 reserve sites deleted  - 16 site allocation boundaries amended  - 22 allocated sites with capacity changes  - 1 reserve site with a capacity change  - 8 new site allocations, and 2 extended existing sites  - 2 new reserve sites  - 14 allocated sites and 2 reserve sites renumbered. | | | | | | | | | |  | | | | **FC4.2** | Appendix 1 | | | Amended site specific policies.  New reasoned justification and site specific policy for Scalford and Great Dalby. | | | | | | | | | | | | | | | - Reflects FC4.1 above.  - Amended criteria setting out development conditions for some site specific policies. | | | | | | | | | |  | | | |  | | | | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | | | | | | | | | | **SITE SETTLEMENT** *(Please select the site that you interested in (additional sites will need to be entered on another form)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **SITE** | | | | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Ab Kettleby | |  | |  | |  | | | | | **Asfordby** | | | | | | | | | | | |  | | Melton Mowbray | | | | | | | | |  | | | |  | |  | |  | |  | | | | |  | | | | | | | | | | | |  | |  | | | | | | | | |  | | | | Asfordby Hill | |  | |  | |  | | | | | **Croxton Kerrial** | | | | | | | | | | | |  | | Old Dalby | | | | | | | | |  | | | |  | |  | |  | |  | | | | |  | | | | | | | | | | | |  | |  | | | | | | | | |  | | | | Bottesford | |  | |  | |  | | | | | **Easthorpe** | | | | | | | | | | | |  | | Scalford | | | | | | | | |  | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Frisby | |  | |  | |  | | | | | **Harby** | | | | | | | | | | | |  | | Somerby | | | | | | | | |  | | | |  | |  | |  | |  | | | | |  | | | | | | | | | | | |  | |  | | | | | | | | |  | | | | Gaddebsy | |  | |  | |  | | | | | **Hose** | | | | | | | | | | | |  | | Stathern | | | | | | | | |  | | | |  | |  | |  | |  | | | | |  | | | | | | | | | | | |  | |  | | | | | | | | |  | | | | Great Dalby | |  | |  | |  | | | | | **Long Clawson** | | | | | | | | | | | |  | | Thorpe Arnold | | | | | | | | |  | | | |  | |  | |  | |  | | | | |  | | | | | | | | | | | |  | |  | | | | | | | | |  | | | |  | |  | |  | |  | | | | | **Wymondham** | | | | | | | | | | | |  | | Waltham | | | | | | | | |  | | | | **PLEASE INDICATE THE SITE REFERENCE HERE (If you wish to comment on the approach or policy as a whole please do so in the boxes below):** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **Do you believe that this policy/section of the Melton Local Plan focused change is?** *(Please tick the appropriate box)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 1. Legally Compliant: | | | | | | **Yes** | | |  | |  | | | **No** | | | |  | | | |  | | | | | | | | | | |  | | | | | | | | |  | | | | | |  | | |  | |  | | |  | | | |  | | | |  | | | | | | | | | | |  | | | | | | | | | 2. Sound: | | | | | | **Yes** | | |  | |  | | | **No** | | | |  | | | |  | | | | | | | | | | |  | | | | | | | | |  | | | | | |  | | |  | |  | | |  | | | |  | | | |  | | | | | | | | | | |  | | | | | | | | | 3. Complies with Duty to Co-operate: | | | | | | **Yes** | | |  | |  | | | **No** | | | |  | | | |  | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *\*The considerations in relation to the Local Plan being "sound" are explained in paragraph 182 of the National Planning Policy Framework. If you have entered “No” in relation to 4(2), please go to question 5. In all other circumstances, please go to question 6* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **9. Do you consider that the focused change is unsound because it is not any of the following?** *(Please tick the appropriate box)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Positively Prepared | |  | Justified | | | | | | | | | | |  | | Effective | | | | | | | | | |  | Consistent with National Policy | | | | | | |  | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **3. Please give details of why you consider this focused change 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 this policy or its compliance with the Duty to Co-operate, please use this box to set out your comments.** *(Please continue onto a separate sheet if you require more space)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **4. Please set out what change(s) you consider necessary to make the focused change legally compliant or sound, having regard to the test you have identified at 2 above where this relates to soundness. (NB Please note that any non-compliance with the duty to co-operate is incapable of modification at examination).** **You will need to say why this change will make the suggested focused change 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 continue onto a separate sheet if you require more space)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | ***Please note:*** *Your representation should cover succinctly all the information, evidence necessary and supporting information necessary to support/justify the representation and suggested change, as there will not normally be a subsequent opportunity to make further representations based on this original representation.*  ***After this stage, further submissions will only be at the request of the Inspector based on the matters and issues they identify at the examination.*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **5. Can your representation seeking a change be considered by written representations or do you consider it necessary to participate at the oral part of the examination?** *(Please tick the appropriate box)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **Written Representations** | | | | | | |  | |  | | | | | | | | | | | | |  | | **Participate at the Oral Examination** | | | |  | | |  | | | |  | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **6. If you wish to speak at the examination, 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 at the oral part of the examination.* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | PART C: WHO YOU REPRESENT | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **To help us collate the responses to this consultation, we would be grateful if you could tell us which category best describes who you are representing** *(Please tick the appropriate box)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **Melton Borough Resident** | | | | | | | | | | | |  | | |  | | | | | | |  | | **Planning Agent/Planning Consultant** | | | | | |  | | |  | | |  | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **Developer** | | | | | | | | | | | |  | | |  | | | | | | |  | | **Utility/Service Provider** | | | | | |  | | |  | | |  | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **Government Organisation** | | | | | | | | | | | |  | | |  | | | | | | |  | | **Amenity Group** | | | | | |  | | |  | | |  | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **Other Organisation** | | | | | | | | | | | |  | | |  | | | | | | |  | | **Residents Group** | | | | | |  | | |  | | |  | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **Business** | | | | | | | | | | | |  | | |  | | | | | | |  | | **Town/Parish Council** | | | | | |  | | |  | | |  | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **Other** *(Please state)* | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |  | | |  | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **Do you want to have further involvement in the Melton Local Plan?** *(Please tick the appropriate boxes)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | If you wish to be notified at the address/e-mail provided in Part A when the Melton Local Plan is submitted to the Secretary of State for Communities & Local Government | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |  | | | |  | | | | If you wish to be notified at the address/e-mail provided in Part A when the Inspector's Report is available to view | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | If you wish to be notified at the address/e-mail provided in Part A when the Melton Local Plan is adopted | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | If you/your organisation wish to be included in future consultations on the Melton Local Plan | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | If you/your organisation **do not** wish to be included in future consultations on the Melton Local Plan | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |  PART C: WHO YOU REPRESENT | | | | | | | | | | | | | | | | | | | | | | |
| ****1. Do you consider that the focused change is unsound because it is not any of the following?**** (Please tick the appropriate box) | | | | | | | | | | | | | | | | | | | | | | |
| 1. Positively Prepared | |  | 1. Justified | | | | | |  | | | 1. Effective | | | | |  | 1. Consistent with National Policy | | | |  |

**Please give details of why you consider this focused change 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 this policy or its compliance with the Duty to Co-operate, please use this box to set out your comments.** *(Please continue onto a separate sheet if you require more space)*

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**Please set out what change(s) you consider necessary to make the focused change legally compliant or sound, having regard to the test you have identified at 5 above where this relates to soundness. (NB Please note that any non-compliance with the duty to co-operate is incapable of modification at examination).** **You will need to say why this change will make the suggested focused change 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 continue onto a separate sheet if you require more space)*

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| **Can your representation seeking a change be considered by written representations or do you consider it necessary to participate at the oral part of the examination?** *(Please tick the appropriate box)* | | | | | | | | | | | | |
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| **Written Representations** |  |  | | |  | **Participate at the Oral Examination** |  | |  | |  | |
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| **If you wish to speak at the examination, please outline why you consider this to be necessary:** | | | | | | | | | | | | |
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| ***Please note:*** *The Inspector will determine the most appropriate procedure to adopt to hear those who have indicated that they wish to participate at the oral part of the examination.***ART C** | | | | | | | | | | | | |
| **To help us collate the responses to this consultation, we would be grateful if you could tell us which category best describes who you are representing** *(Please tick the appropriate box)* | | | | | | | | | | | | |
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| **Melton Borough Resident** | | |  |  |  | **Planning Agent/Planning Consultant** | |  | |  | |  |
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| **Developer** | | |  |  |  | **Utility/Service Provider** | |  | |  | |  |
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| **Government Organisation** | | |  |  |  | **Amenity Group** | |  | |  | |  |
|  | | | | | | | | | | | | |
| **Other Organisation** | | |  |  |  | **Residents Group** | |  | |  | |  |
|  | | | | | | | | | | | | |
| **Business** | | |  |  |  | **Town/Parish Council** | |  | |  | |  |
|  | | | | | | | | | | | | |
| **Other** *(Please state)* | | |  | | | | | | |  | |  |
|  | | | | | | | | | | | | |
| **Do you want to have further involvement in the Melton Local Plan?** *(Please tick the appropriate boxes)* | | | | | | | | | | | | |
| If you wish to be notified at the address/e-mail provided in Part A when the Melton Local Plan is submitted to the Secretary of State for Communities & Local Government | | | | | | | | | | |  | |
|  | |
|  | |
| If you wish to be notified at the address/e-mail provided in Part A when the Inspector's Report is available to view | | | | | | | | | | |  | |
|  | | | | | | | | | | | | |
| If you wish to be notified at the address/e-mail provided in Part A when the Melton Local Plan is adopted | | | | | | | | | | |  | |
|  | | | | | | | | | | | | |
| If you/your organisation wish to be included in future consultations on the Melton Local Plan | | | | | | | | | | |  | |
|  | | | | | | | | | | | | |
| If you/your organisation **do not** wish to be included in future consultations on the Melton Local Plan | | | | | | | | | | |  | |
| **Thank you for taking the time to submit representations on the Melton Local Plan: Addendum of Focused Changes 2017. It should be noted that representations cannot be treated as confidential.** | | | | | | | | | | | | |
| |  | | --- | | **Would you like to be kept informed of other council services? We will not share this data with another provider** *(Please tick the appropriate boxes)* | | | | | | | | | | | | | |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| All council services |  | Community |  | Tourism & events |  | Town Centre |  |
|  |  |  |  |  |  |  |  |
| Benefits |  | Local Plan |  | Online services |  | Waste and recycling |  |
|  |  |  |  |  |  |  |  |