



## Lewes District Local Plan Part 2: Site Allocations and Development Management Policies DPD

### Main Modifications Representation Form

Representations are invited on the proposed Main Modifications to the Submission Lewes District Local Plan Part 2: Site Allocations and Development Management Policies DPD. The Main Modifications are proposed in response to issues raised at the Local Plan examination hearings and are considered necessary to make the Local Plan Part 2 'sound'.

**Representations are only sought on the proposed Main Modifications to the Submission Local Plan Part 2 as set out in the Schedule of Main Modifications and the Sustainability Appraisal Addendum.** This consultation is not about any other aspects of the Local Plan.

The Submission Local Plan Part 2, the Schedule of Main Modifications, and the Sustainability Appraisal Addendum are available at <https://www.lewes-eastbourne.gov.uk/planning-policy/local-plan-part-2-examination/> Hard copies are also available to view at the Council offices (see address below) and local libraries.

**All representations must be received by midnight on Monday 19<sup>th</sup> August 2019.**

The quickest and easiest way to submit comment is via the online consultation website at: [www.lewes-eastbourne.gov.uk/planningconsultation](http://www.lewes-eastbourne.gov.uk/planningconsultation). Alternatively comments can be sent to the District Council by:

**Post:** Planning Policy Team  
Lewes District Council  
Southover House  
Southover Road  
Lewes  
BN7 1AB

**E-mail:** [ldf@lewes-eastbourne.gov.uk](mailto:ldf@lewes-eastbourne.gov.uk)

A guidance note accompanies this form and can be used to help with its completion. The form has two parts:

Part A – Personal Details

Part B – Your representations(s). Please fill out a separate sheet for each representation you wish to make.

## Part A

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	1. Personal Details	2. Agent's Details (if applicable)
Name	<input type="text"/>	<input type="text"/>
Job Title (where relevant)	<input type="text"/>	<input type="text"/>
Organisation (where relevant)	<input type="text"/>	<input type="text"/>
Address	<input type="text"/>	<input type="text"/>
Telephone Number	<input type="text"/>	<input type="text"/>
Email Address	<input type="text"/>	<input type="text"/>

**Part B – Please use a separate sheet for each representation**

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Name or Organisation:

**3. Please identify the reference number of the Main Modification (MM) that you wish to comment on:**

**4. Do you consider the proposed Main Modification that you are commenting on is unsound because it is not:**

(1) Positively prepared

(2) Justified

(3) Effective

(4) Consistent with national policy

For an explanation of the above terms please refer to the accompanying Guidance Note.

**5. Please give details about why you consider the proposed Main Modification is unsound, if that is the case. Please be as precise as possible. If you wish to support the soundness of the proposed modification, please also use this box to set out your comments.**

(Continue on a separate sheet/expand box if necessary)

6. Please set out what change(s) you consider necessary to make the proposed Main Modification sound, having regard to the test you have identified at Q5 above. You will need to say why this change will make the proposed modification 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.

(Continue on a separate sheet/expand box if necessary)

**Please note:** Your representation should cover succinctly all the information, evidence and supporting information necessary to support/justify the representation and the suggested change, as there will not normally be a subsequent opportunity to make further representations.

**7. If your representation is seeking a change, do you consider it necessary to participate at the oral part of the examination if the Inspector decides further examination hearing sessions are necessary?**

**No**, I do not wish to participate at the oral examination

**Yes**, I wish to participate at the oral examination

**8. If you wish to participate at the oral part of the examination if the Inspector decides further examination hearing sessions, 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 any future examination hearing.

Signature:

Date:

**Do you wish to be notified of any of the following?**

(i) The publication of the recommendations of the Inspector appointed to examine the Local Plan Part 2 (the Final Report)  Yes  No

(ii) The adoption of the Local Plan Part 2  Yes  No

**Thank you for taking time to respond to this consultation**

Please note that written representations not using this form will still be accepted, provided they are received by the specified date and time.