



Part B – Please use a separate sheet for each representation

Name or Organisation:

3. To which part of the Local Plan does this representation relate?

Paragraph

1

Policy

HC14

Policies Map

036C

4. Do you consider the Local Plan is :

(1) Legally compliant

Yes

No

/

(2) Sound

Yes

No

/

(3) Complies with the Duty to co-operate

Yes

No

/

Please tick as appropriate

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

The area's health services are already under great stress. Additional service requirements would cause yet more problems in an already under funded health service

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

6. Please set out the modification(s) you consider necessary to make the Local Plan legally compliant and sound, in respect of any legal compliance or soundness matters you have identified at 5 above. (Please note that non-compliance with the duty to co-operate is incapable of modification at examination). You will need to say why each modification will make the Local Plan 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.

Do not increase the burden to the Health Professionals and Tax Payers.