

Part B Commenting on the Local Plan

The information you provide in part B here will be published anonymously

Please use a separate copy of the Part B form for each individual representation or comment that you wish to make. You must also complete and attach one copy of Part A of this form.

| 1. Your details (please ensure these are the same as those provided in Part A) | | | |
|--|------------|-------------------------------|-----|
| Name: | | Organisation (if applicable): | |
| | | | |
| | | | |
| | | | |
| 2. To which part of the Local Plan does this representation relate? | | | |
| Paragraph No or | | | |
| Policy No | | | |
| Policies Map | | | |
| Name/No | | | |
| | | | |
| 3a. Do you consider this paragraph or policy of the Local Plan to be: | | | |
| Please refer to guidance note at: www.scilly.gov.uk/local-plan-consultation-2019 for an | | | |
| explanation of these terms. | | Vaa | NI. |
| Logolly compliant | | Yes | No |
| Legally compliant | | | |
| Complies with the duty to co-operate | | | |
| Sound | | | |
| 3b. If you think this paragraph or policy of the Plan is not sound, this is | | | |
| because: | | | |
| It is not justified | | | |
| It is not effective | | | |
| It is not positively prepared | | | |
| It is not consistent with nation | nal policy | | |
| | | | |
| 4. Your comments | | | |
| Please give details of why you consider this part of the Local Plan is not legally | | | |
| compliant, is unsound or does not comply with the duty to co-operate. | | | |
| Alternatively, if you wish to support any of these aspects please provide details. | | | |
| Please be as precise as possible. Continue on additional paper if necessary. | | | |
| Tick if Extra Sheets added. | | | |
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| | | | |
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End