North East Lincolnshire Local Plan review

Draft Plan with Options Regulation 18 consultation response form

Please return this form by **5pm on Friday 8 March 2024**, to:

Local Plan  
Equans  
Municipal Offices  
Town Hall Square  
Grimsby  
DN31 1HU.

For further information please visit: [www.nelincs.gov.uk/local-plan-review](http://www.nelincs.gov.uk/local-plan-review)

This form has two parts:

* Part A: About you (and your client)
* Part B: Your comments (your response to the options and questions set out in the Draft Plan with options.

# Part A: About you

Please note that:

1. We cannot register your responses without your details.
2. Responses cannot be kept confidential and will be available for public scrutiny however your contact details will not be published.
3. All information from this stage of the Local Plan review may be sent for examination by an independent inspector.
4. All personal data will be handled in accordance with the Council’s Privacy Policy. You can view the Council's privacy notice at: <https://www.nelincs.gov.uk/your-council/information-governance/privacy-notice/>.

|  |  |
| --- | --- |
| Name | Click or tap here to enter text. |
| Position | Click or tap here to enter text. |
| Organisation | Click or tap here to enter text. |
| Email | Click or tap here to enter text. |
| Telephone | Click or tap here to enter text. |
| Mobile | Click or tap here to enter text. |
| Address | Click or tap here to enter text. |

If you the agent, please provide your client’s details:

|  |  |
| --- | --- |
| Name | Click or tap here to enter text. |
| Position | Click or tap here to enter text. |
| Organisation | Click or tap here to enter text. |
| Email | Click or tap here to enter text. |
| Telephone | Click or tap here to enter text. |
| Mobile | Click or tap here to enter text. |
| Address | Click or tap here to enter text. |

# Part B: Your comments

Please complete a separate form for each response.

**Q1. Which part of the Draft Plan are you responding to:**

|  |  |
| --- | --- |
| **Section:** |  |
| **Policy:** |  |
| **Paragraph** |  |
| **Table** |  |
| **Figure** |  |
| **Site:** |  |
| **Other:** |  |

**Q2. Do you support the section of the document you are commenting on?**

|  |  |
| --- | --- |
| **Support** |  |
| **Object** |  |
| **Partially support** |  |
| **Other (please describe)** |  |

If other, please describe why.

**Q3. Do you have any comments?**Please provide as much detail as possible to explain and support your response.

|  |
| --- |
| *(Continue on a separate sheet/expand the box if necessary.)* |

Please attach any documents you feel are appropriate to support your response.

**Q4. Do you wish to be kept informed about future stages of the Local Plan review?**

|  |  |  |  |
| --- | --- | --- | --- |
| Yes |  | No |  |

Please ensure that we have up-to-date contact details at which we can contact you.

|  |  |  |  |
| --- | --- | --- | --- |
| **Signature:** |  | **Date:** |  |