

**Page: Client or Agent details (Consultations)**

- First name Carolyn
- Last name Wormwell
- Your address [REDACTED]
- Telephone number [REDACTED]
- Email address [REDACTED]
- Preferred contact method Email
- Is an agent representing you No

**Page: Local Plan Legal Compliance**

- Do you consider the Local Plan to be legally compliant Yes

**Page: Local plan Soundness**

- Do you consider the Local Plan to be sound Yes

**Page: Local plan additional comments**

- Please provide any additional comments in support of your representation I believe it is vital to keep local green spaces in order to maintain the quality of living in the area.
- Do you wish to participate at the hearing sessions No
- How did you find out about this consultation Email