

Pendle Borough Council Annual Governance Statement

2024/25

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Executive summary

Pendle Borough Council is committed to improving the lives of all residents and creating opportunity and prosperity for local people and businesses. This commitment is set out in the Council’s Corporate / Council Plan and describes how the council will meet the challenges ahead and make the most of opportunities.

To be successful the Council must have a solid foundation of good governance and sound financial management. Pendle’s Local Code of Corporate Governance ensures that we are doing the right things, in the right way, in line with our values. The Local Code is supported by a Governance Framework that sets out how and what the council will seek to obtain assurance on.

A copy of the Council’s Local Code and Governance Framework is available on our website at **www.pendle.gov.uk**

Each year the Council is required to produce an Annual Governance Statement (AGS) which describes how its corporate governance arrangements set out in the Local Code have been working. This Statement gives assurances on compliance for the year ending 31 March 2025 and up to the date of approval of the Statement of Accounts.

The Leader of the Council and Chief Executive both recognise the importance of having a solid foundation of good governance and sound financial management. They pledge their commitment to address the matters highlighted in this Statement, and to further enhance our governance arrangements to enable delivery of our Corporate/Council Plan 2023-2027.

The Leader and Chief Executive confirm they have been advised of the implications of the governance review by senior Management and the Accounts and Audit Committee and are satisfied that the steps outlined in this document will ensure that our governance arrangements remain fit for the future.

The Council has undertaken a comprehensive review of its Governance Framework and internal control systems for the 2024/25 financial year. This review, informed by internal and external audit findings, risk assessments, and performance evaluations, concludes that the Council maintains a generally robust governance environment. However, several areas for improvement have been identified and are being actively addressed.

Key Strengths and Achievements

- **Internal Control & Financial Management:** The Chief Finance Officer confirmed that internal controls are robust and financial regulations are adhered to. Internal Audit (MIAA) issued a Substantial Assurance rating, affirming effective control systems.
- **Governance Oversight:** Regular reviews by the Corporate Governance Steering Group and the Accounts and Audit Committee ensured continuous monitoring and improvement of governance practices.
- **Risk Management:** Significant enhancements were made to the Strategic Risk Register, supported by training and new toolkits for risk identification and escalation.
- **Performance Management:** The Council's Performance Framework was updated and Performance Clinics extended to include Liberata services, with regular Corporate Leadership Team and Executive oversight.
- **Audit & Compliance:** Internal Audit plans were delivered in full, and no internal fraud was reported. Anti-Fraud and Corruption, Anti-Bribery, and Whistleblowing policies and Gifts and Hospitality Policy were disseminated to staff.
- **Business Continuity:** Plans were tested and updated, demonstrating resilience in critical service areas.
- **Complaints Handling:** A new digital system was implemented, and further improvements are underway to enhance monitoring and responsiveness.

Governance Challenges and Areas for Improvement

The review identified several governance issues requiring targeted action:

1. **Financial Sustainability:** Urgent development of medium-term financial plans is needed to address budget gaps without over-reliance on reserves.
2. **Capacity in Financial Services:** Resource constraints have impacted the timely production of financial statements.
3. **Member Governance Understanding:** Training is required to support the embedding of the Leader and Executive model.
4. **Joint Venture Governance:** Conflicts of interest and oversight gaps identified by External Audit. New procedures are being introduced based on independent legal advice.
5. **Information Governance:** Weaknesses identified by Internal Audit are being addressed through structured action plans.
6. **Planning Process Consistency:** An independent review will assess the efficiency and fairness of planning application procedures.
7. **Complaints Monitoring:** Enhancements to reporting, coordination, and KPI tracking are being implemented.
8. **Contracts Register:** Work is ongoing to ensure full population and accuracy of the register.
9. **Project Management:** Further development is needed on programme and project management arrangements.

Next Steps

An action plan addressing these issues will be monitored by the Corporate Governance Steering Group and the Accounts and Audit Committee throughout 2025/26. The Council remains committed to continuous improvement, transparency, and accountability in all aspects of governance.

Signatures from Chief Executive and Leader to come

Date of approval

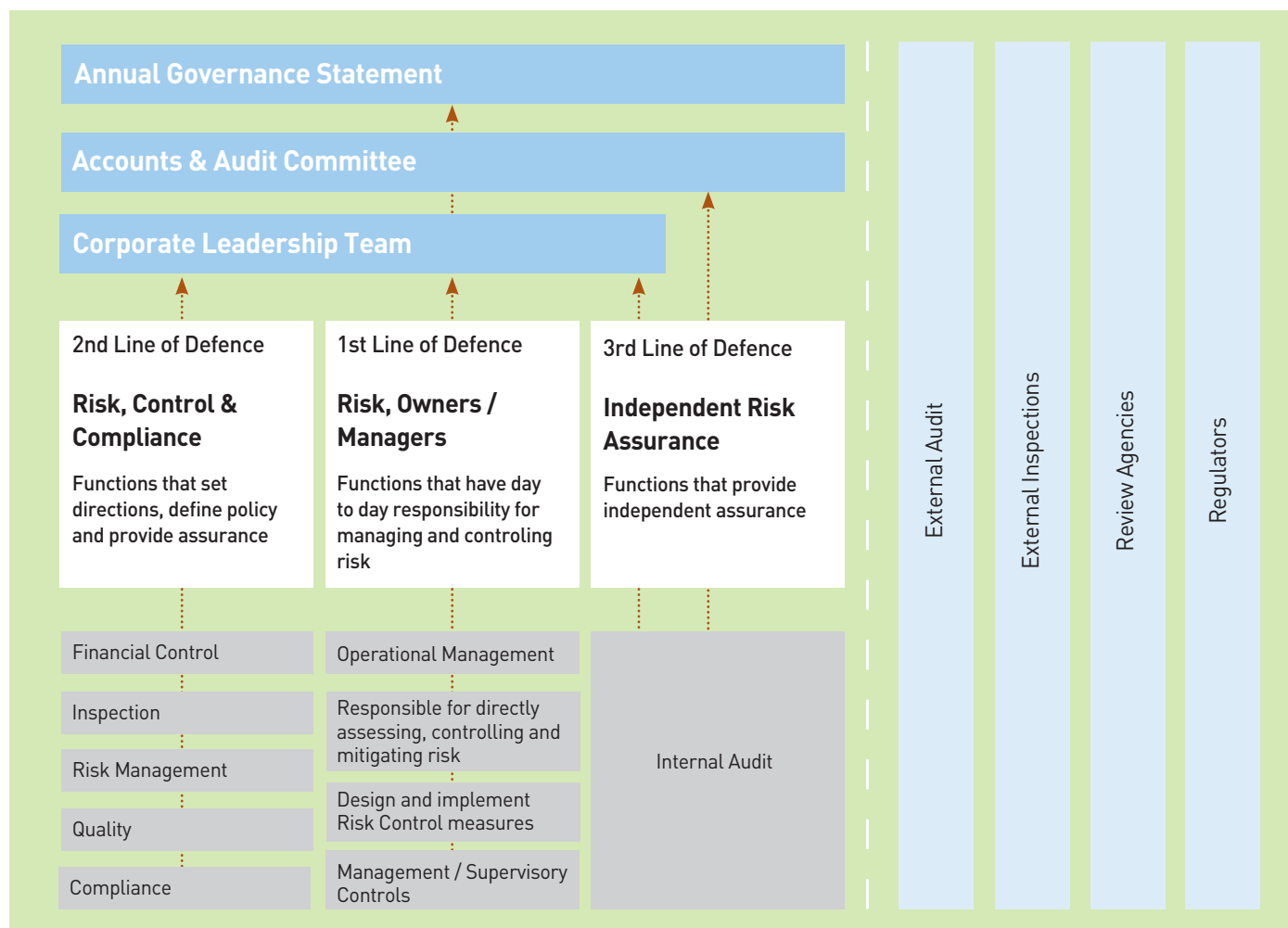
Our assessment of effectiveness

The Council has a responsibility for conducting the continuous review of the effectiveness of its Governance Framework including the system of internal control. This review of effectiveness is informed by the work of the Corporate Leadership Team and the Corporate Governance Steering Group who have a responsibility for the development and maintenance of the governance environment, the Annual Report from the Head of the Internal Audit Service and reports from the External Auditor and any other review agencies and inspectorates.

The purpose of a review is to identify and evaluate the key controls in place to manage principal risks. It also requires an evaluation of the assurances received, identifies gaps in controls and assurances and should result in an action plan to address significant internal control issues.

The opinion of the Chief Finance Officer is that the Council operates robust internal controls and good public financial management. However, further action is required to manage financial pressures and develop strategies to meet the significant financial challenges that face the Council over the lifetime of the current Medium-Term Financial Plan.

There has been no re-course for the Chief Finance Officer to exercise their statutory powers, and the Council complies with its financial regulations and procedures together with relevant codes of practice and guidance. The Finance Function provides an effective and efficient service whilst enabling the Council to meet its priorities within a robust financial framework. Evidence to support this opinion is provided below.



The process that has been applied in maintaining and reviewing the effectiveness of the Council's Governance Framework includes the following: -

- An annual review of the Constitution is undertaken at least annually, updated as a required and published on the Council's website.
- The Council's decision-making arrangements operated according to the Constitution, either through the Council, Committees, or the Scheme of Delegation. Decisions arising from these arrangements have been published on the Council's website as required.
- The Council continues to respond where possible in a timely manner to legitimate Freedom of Information (Fol) requests and Subject Access Requests (SARs) as required.
- The arrangements for scrutiny under the committee system operate via a Task and Finish Committee as required allowing for the review of key policy areas and providing opportunities for public involvement in specific matters of business. During 2024/25 two Task & Finish Reviews were undertaken which related to Implementation of the Member Code of Conduct and Mechanical Street Cleansing (Compact Sweepers).
- The Overview and Scrutiny Committee also reviewed:
 - Bulky Household Waste and Replacement Waste Containers
 - Land and Property Asset Management Strategy 2025/28
- Further scrutiny of Executive decisions is also provided by the Council's Call-In procedures. This is where any three members of the Council (representing at least two of the political groups) may sign and deliver to the Monitoring Officer a 'call-in notice' stating why they feel that the decisions should be considered further. Group Leaders will then be consulted to obtain each of their views, potentially resulting in referral back to Executive for re-consideration. There were no call-in notices taken forward during 2024/25.
- The Council has operated a Standards regime consistent with the requirements of the Localism Act 2011 during the year. There were two hearings of the Standards Hearing Committee convened during 2024/25 which involved two complaints, both of which were upheld. This led to a finding of a breach of the Code of Conduct and sanctions being imposed.
- The Council continued to participate in a range of partnership arrangements during 2024/25 including a range of formal and informal partnerships.
- The Council's Performance Management Framework has operated effectively during the year and an updated Performance Management Framework incorporating Data Quality Procedures was launched to staff during an Extended Management Team session in February 2025. The Council continues to review and evolve the use of Performance Clinics to enable more focussed discussions around service delivery and performance, with Liberata services now being included in the process. Monitoring information on key areas of performance has been provided to the Performance Clinics for review and action where this has been considered necessary. Performance Management information has also been reviewed by the Executive.
- The Liberata Performance Management Framework was suspended during 2020/21 due to the Covid-19 Pandemic. The Framework has been reviewed, agreed and re-instated for 2024/25. A further review has been conducted for 2025/26.
- A Contract Management Training Session was delivered by North West Employers (NWE) to the Council's Corporate Management Team and key Client leads in March 2025. The purpose of this was to gain more engagement with CMT on delivery of the Liberata Contract and enable an effective review of the contract and associated governance arrangements, which is currently underway.
- The Council has embedded people management processes and procedures. In support of this, there is a Workforce Strategy in place. This has been approved by Corporate Management Team and shared with staff. The associated action plan is currently being delivered.
- The Council published its annual Pay Policy in line with the statutory requirements of the Localism Act 2011, following approval by Council on 27th March 2025.

- During 2024/25, there continued to be impacts on staffing across numerous services of the Council. This follows a national trend on difficulties in recruiting in certain roles, for example Environmental Health and Planning officers. Whilst some vacancies have been filled, albeit in some cases on an interim / temporary / consultancy basis, there are still vacancies unfilled which continue to have an impact on service delivery.
- During early 2024 the Council's had an Interim Director of Resources (S151 Officer) in place. A permanent replacement was appointed and commenced employment on 24th June 2024.
- The Council's Chief Executive resigned and left the Council in March 2025. An Interim Chief Executive has been in place since 3rd March 2025 with recruitment for a permanent replacement successfully completed. Subject to ratification by Council, the new Chief Executive will commence employment on 6th October 2025.
- The Property Services function was transferred back to the Council from Liberata UK Ltd from 1st April 2024 but the Council experienced difficulties recruiting a Head of Service. However, as of February 2025, a permanent Head of Property and Engineering Services is now in post.
- To support the Council's staffing resource with their physical and mental health wellbeing, a range of health and wellbeing advice, guidance and services continued to be made available. This was supplemented by health and safety training which was delivered via an online solution called iHASCO.
- Regular reports on the Council's Corporate Governance arrangements, as required by the Local Code of Corporate Governance, have been submitted to both the Executive and the Accounts and Audit Committee during the year as appropriate. Indeed, the Council's corporate governance arrangements have been under regular review by the Corporate Governance Steering Group which has reported regularly to the Council's Accounts and Audit Committee.
- The Council's Strategic Risk Register (SRR) and Risk Management arrangements have undergone a comprehensive review during 2024/25. There have been significant improvements made in the content, format and monitoring of the SRR to strengthen our arrangements in this area and it has been maintained under regular review during the year and updated periodically.
- A Risk Horizon Scanning session was delivered by our insurers, Zurich, to Corporate Leadership Team on 9th April 2024 and a refresher training programme for staff was delivered to Corporate Management Team on 29th July 2024. This training was followed by a comprehensive review of the existing SRR by Zurich, with the recommendations for improvements being implemented throughout the remainder of the year. A Risk Management Training and Horizon Scanning session was also delivered to councillors on 12th September 2024.
- A Risk Management Toolkit and Guidance for Scoring Risks have been developed, along with a template for identifying, assessing and scoring risks for consideration for escalation onto the SRR. These were launched at an Extended Management Team session in February 2025 and are now in use.
- Risk management matters have been considered by Corporate Management Team, the Corporate Governance Working Group and by Executive. To ensure councillors are aware of the Council's key risks, details of the key risks are periodically reported to the Accounts and Audit Committee and Executive.
- The Accounts and Audit Committee continued to meet throughout the year and received various reports on the progress by External and Internal Audit against their respective work plans.

- The Internal Audit service was outsourced to Mersey Internal Audit Agency (MIAA) in March 2020, with the contract being retendered for 1st April 2025 onwards. MIAA were once again successful in this process. As part of this service MIAA are required to provide the overall annual opinion on adequacy of internal controls of the Council. The overall opinion expressed by MIAA for 2024/25 stated: –
- During the year, the Accounts and Audit Committee agreed an Internal Audit Charter. This is a mandated requirement of the Public Sector Internal Audit Standards and is a formal document that defines internal audit activity, authority, and responsibility.
- The 2024/25 Internal Audit Plan was delivered in year with focus on provision of the Head of Internal Audit Opinion. Internal Audit's review coverage focused on the organisation's assurance framework, core and mandated reviews including follow up of previous internal audit recommendations as well as a range of individual risk-based reviews. There were 12 scheduled audits in the year. A number of core and risk-based audits were undertaken with 8 'Substantial Assurance' and 3 'Moderate Assurance' opinions being returned, one review did not provide an assurance opinion. Follow-up reviews were also undertaken during the year and Internal Audit concluded that the Council has made reasonable progress with regards to the implementation of recommendations. Internal Audit will work with Management to address the weaknesses identified in these audits and progress will be reported to the Accounts and Audit Committee.
- The internal audit function, delivered by MIAA, underwent an External Quality Assessment of Conformance to the Public Sector Internal Audit Standards by CIPFA. The report produced in November 2020 provided the following opinion: –

*“As highlighted above, the overall opinion for the period 1st April 2024 to 31st March 2025 provides **Substantial Assurance, that that there is a good system of internal control designed to meet the organisation's objectives, and that controls are generally being applied consistently.***

Context: This opinion is provided in the context that the Council, like other organisations across the public sector, is facing a number of challenging issues and wider organisational factors including to changes in the political landscape, financial and governance challenges and the increasing focus on collaboration between organisations and across systems.

***Compliance with professional standards:** In providing this opinion we can confirm continued compliance with the definition of internal audit (as set out in your Internal Audit Charter), code of ethics and professional standards. We also confirm organisational independence of the audit activity and that this has been free from interference in respect of scoping, delivery and reporting.*

***Purpose:** The purpose of our Head of Internal Audit (HoIA) Opinion is to contribute to the assurances available to the Accountable Officer and the Council which underpin the Council's own assessment of the effectiveness of the system of internal control. As such, it is one component that the Council takes into account in making its Annual Governance Statement (AGS).“*

*“It is our opinion that MIAA's self-assessment is accurate and, as such, we conclude that **MIAA FULLY CONFORMS** to the requirements of the Public Sector Internal Audit Standards.”*

MIAA assess compliance with PSIAS each year and can confirm ongoing compliance with required standards.

- The Accounts and Audit Committee approves updates to the Anti-Fraud, Theft and Corruption Policy, the Anti-Money Laundering Policy, the Anti Bribery Policy, and the Whistleblowing Policy as required. Details of these updated Policies are made available to all staff via a Message of the Day.
- No instances of internal fraud were reported during the year.
- The Corporate Governance Steering Group (CGSG) meet bi-monthly to consider issues such as: Subject Access Requests; Data Retention Policy; review and consolidation of IT Policies; Data Privacy Impact Assessments (DPIAs); GDPR, Information and Cyber Security Staff Training; Internal Audit findings; monitoring reports from the Data Protection Officer (DPO) and Information Governance arrangements within key partner organisations. It also brings together the work of the Risk Management Working Group (RMWG), the Council's DPO / Monitoring Officer, Internal Audit and Finance providing an overview of the Council's governance arrangements.
- The Council provides staff with online Cyber / Information Security and GDPR training, ensuring regular updates on information security and governance for all staff using ICT. The training platform in use is called KnowBe4, and it also incorporates a phishing tool. Training completion rates are regularly reported to managers and to the CGSG.
- The Council's 2023/24 Statement of Accounts hit the backstop, which is a deadline set by the government to clear the backlog of unaudited accounts, resulting in the external auditor, Grant Thornton LLP, issuing a disclaimed audit opinion. The Value for Money assessment was carried out and the auditors made several recommendations for improvement, which are detailed in the Action Plan 2025/26 and the Council is working towards implementing.
- The Council has in place robust reporting arrangements on the financial affairs of the Council. Regular Strategic Monitoring Reports were submitted to the Executive during the year. Reports were also produced on the Council's Medium Term Financial Plan and Financial Strategy, and these were used to inform the budget and Council Tax setting process.
- The Council's Business Continuity Plans are in place and update of these plans were conducted as required throughout 2024/25. These plans consist of:
 - Business Continuity Policy and Strategy
 - Strategic Crises Management Plan
 - Local Crisis Management Plan for each main office location and Fleet Street Depot
 - a Business Recovery Plan for critical services
- The Council's Business Continuity and Disaster Recovery arrangements were subject to a scheduled desktop test during January 2025. This test simulated the loss of the Council's Elections system.
- The Council has in place a Complaints Policy and Complaint Handling Guidelines for staff. The complaints process was historically managed and monitored via the use of individual manual systems within each service. This proved to be inefficient and was replaced by an electronic reporting system via Jadu. Following the launch of this system a formal review of the Complaints process and procedures has been undertaken, and the policy and handling guidelines have been reviewed and updated in line with the Local Government and Social Care Ombudsman Complaints Handling Code.
- The Council published its 2023/24 financial statements for 2023/24 on 13th January 2025. At that point, the remaining timescale for completion of the audit of the financial statements by 28th February 2025 was not viable. Therefore, the 2023/24 financial statements were back stopped and a disclaimer opinion issued.

How have we improved our Governance Arrangements In 2024/25

It is stressed that no system of control can provide absolute assurance against material misstatement or loss. This Statement is intended to provide reasonable assurance.

Last year's Annual Governance Statement highlighted the following areas for improvement. Regular updates on the progress in addressing these issues have been reported to Management Team and the Executive throughout the year and the following narrative sets out the action which has been taken to address these issues:

- **Issue No 1 – Recruitment / staff vacancies remain an issue in some areas**

Workforce Strategy was approved by the Executive on 19th September 2024. An Action Plan has been developed and is now currently undergoing further review to ensure implications of Local Government Reorganisation are captured appropriately.

However, there are still some key vacancies in areas and Heads of Services are working to fill these (Engineering, Estates, Building Control and Accounts).

The permanent Chief Executive has been appointed, and they will join the Council in October 2025.

- **Issue No 2 – Ability to complete all financial statutory returns in a timely manner**

The new Project Accountant post had to be re-advertised and the recruitment process is currently underway.

- **Issue No 3 – The Council has identified gaps between its future spending and income for 2025/26 onwards but has not identified the necessary savings to bridge these gaps. If reserves are used to bridge this gap, instead of identifying savings then Useable Reserves will reduce to less than half of current level. COMPLETED**

The Budget Working Group (BWG) meetings that lead up to the approval of the 2025/26 MTFP concluded in February. The next round of BWG meetings are due to commence in July 2025.

Meetings with Liberata on 'Continuous Improvement' have been set in place and are ongoing.

- **Issue No 4 – The roles of Area Committees within the Council's decision-making structures give rise to a significant weakness because of inconsistent and sometimes poor decision making resulting in the Council incurring additional costs, as well as damage to its reputation.**

The report is currently being finalised. The findings and any proposed actions will be reported to Council in Summer 2025.

- **Issue No 5 – The new governance and decision making processes are not fully understood by councillors. As a result, there have been instances of councillors of the Executive speaking against decisions made by the Executive at Full Council meetings.**

The Local Government Association facilitators are working with councillors. This work is ongoing.

- **Issue No 6 – There is evidence of failures to manage the relationships between the Council and the joint venture (JV) companies effectively and of conflicts of interest, arising between councillors roles as directors of the companies which are significant and create risks of negative impacts on the Council's interests in the companies as a shareholder, and on the reputation of the Council as a whole.**

Due to delays the report was received in December 2024. The report was presented to the staff and councillor directors of the JVs in April 2025.

Staff are currently preparing a plan of actions that will be presented to the Executive and the councillor directors in July 2025.

- **Issue No 7 – Fundamental weaknesses were identified in the Council's Information Governance processes as a result of an Internal Audit Review (Limited Assurance).**

The Council has engaged MIAA to assist with implementing the required improvements to our Information Governance arrangements. This work is underway.

- **Issue No 8 – Fundamental weaknesses were identified in the Council's Staff Performance Management processes as a result of an Internal Audit Review (Limited Assurance). COMPLETED**

Learning and Development Officer post filled with employment commenced on 10th September 2024. This post has prioritised driving the delivery of a revised PDR process for 2025/26. This is also reflected in the Workforce Strategy.

Where our governance needs to improve

In concluding this year's review of the Council's governance arrangements, some improvements have been identified to strengthen our governance

framework. These are listed in the table below. An action plan to address these matters will be produced and this will be subject to regular monitoring by the Council's Accounts and Audit Committee as appropriate. The aim is to conclude these matters during the 2025/26 financial year.

Issue No.	Issue Identified	Source of Evidence	Summary of Action Proposed	Responsible Officer
1	Financial Sustainability Identify all the significant financial pressures that are relevant to the Council's short and medium-term plans and build these into them	MTFP Budget planning Savings plans Financial stability / sustainability	In July 2025 the Council will begin work on the 2026/27 budget and MTFP. This will involve short and medium-term plans to close its budget gap by generating savings and efficiencies and not relying on reserves which is unsustainable. The preparation of plans will include taking decisions regarding future years before the 2026/27 budget setting Council. Also, the Council will maintain its focus on in-year budget monitoring.	Director of Resources
2	Governance – Capacity Capacity in the Financial Services Team affecting the Council's ability to produce its draft accounts before the statutory deadline	Management Assurance Statements Statutory deadlines met	The Council is currently working on producing the 2024/25 Statement of Accounts, which will be published by the statutory deadline. The Council added an extra post into the finance team to increase capacity, however to-date it has not been possible to recruit to this post, which is placing significant pressure on the existing team members.	Director of Resources
3	Governance – Barriers to Change The new governance and decision-making processes are not fully understood by councillors. As a result, there have been instances of councillors of the Executive speaking against decisions made by the Executive at Full Council meetings	Councillor Training Attendance Schedules Ongoing mandatory development programme in place Removal of legacy arrangements	The Council has engaged the Local Government Association (LGA) to work with councillors to identify any barriers to completing the change from a Committee system to the Leader and Executive model successfully.	Director of Resources
4	Governance - Joint Ventures (JV) There is evidence of failures to manage the relationships between the Council and the JV companies effectively and of conflicts of interest, arising between councillors roles as directors of the companies which are significant and create risks of negative impacts on the Council's interests in the companies as a shareholder, and on the reputation of the Council as a whole	Independent Report Improved governance arrangements in place Legal agreements in place Council staff roles clarified	An independent legal advisor has undertaken a review of the relationships and governance of its JV companies. Following the independent report the Council is to introduce new Governance procedures in Summer 2025.	Director of Resources

Issue No.	Issue Identified	Source of Evidence	Summary of Action Proposed	Responsible Officer
5	<p>Governance – Information Governance</p> <p>Fundamental weaknesses were identified in the Council's Information Governance processes as a result of an Internal Audit Review (Limited Assurance)</p>	<p>MIAA Recommendations Follow-up and Tracker.</p> <p>Improved Information Governance Arrangements in place, such as:</p> <ul style="list-style-type: none"> - Up-to-date Record of Processing Activity (ROPA), Information Asset Register (IAR) and data flow maps in place with supporting policies and procedures. - Assigned and trained Information Asset Owners (IAO) and Information Asset Administrators (IAA). - To consider a dedicated, experienced IG resource. - Training needs analysis and training plan in place. 	<p>The Council will deliver the recommendations in line with the management responses agreed and submitted to MIAA which have been captured in the final report.</p>	Head of Legal & Democratic Services
6	<p>Governance – Planning Process</p> <p>The arrangements for determining planning applications were inconsistent</p>	<p>Independent Report</p> <p>Improved arrangements in place</p>	<p>The Council has commissioned a focussed independent legal report on the consistency, costs and efficiency of its planning process and the potential future impacts of continuing the current arrangements.</p> <p>The report is due to be finalised in summer 2025 and will be reported to Council in due course.</p>	Director of Resources

Issue No.	Issue Identified	Source of Evidence	Summary of Action Proposed	Responsible Officer
7	<p>Complaints - management and monitoring arrangements</p> <p>A recent review of the policy and handling process identified several issues, which we are addressing. Each of these issues are identified and addressed in the Summary of Action Proposed column.</p>	<p>Reports to CMT</p> <p>Cohort of identified Complaints Co-ordinators</p> <p>Performance Clinics Presentations</p> <p>KPI Information</p> <p>Performance Update Reports to the Executive</p>	<p>Review and consider if the existing system is the best way to collate and monitor complaints handling and trends analysis and replace or update as required.</p> <p>Weekly reports to be issued to CMT detailing all complaints received and outstanding for resolution.</p> <p>Lead Complaints Co-Ordinator to be identified.</p> <p>Dedicated officers to be identified in each service to answer and manage responses to Complaints.</p> <p>Quarterly report to be included in the Council's quarterly Performance Clinics – this will be a snapshot for each service with narrative provided on issues identified, lessons learned and actions taken.</p> <p>Improved commentary and analysis to be provided to support the performance on the Councils KPI '% of formal complaints handled within timescales' (DIR 1).</p> <p>KPI target to be re-instated.</p>	Head of Legal & Democratic Services
8	<p>Programme and Projects Management arrangements</p> <p>It has been identified that there is no formal corporate approach to Programme and Project Management across the organisation resulting in a lack of consistency, clarity and effective processes being in place.</p>	<p>Improved programme and project management practices in place.</p>	<p>The Council has established a working group to develop and implement a standard suite of programme and project management documentation.</p> <p>An Internal Audit Review of our arrangements has also been scheduled for 2025/26.</p>	Head of Policy & Commissioning

We propose over the coming year to take steps to address the above matters to further enhance our governance arrangements. We are satisfied that these steps will address the need for improvements that have been identified in our review of effectiveness and will monitor their implementation and operation as part of our next annual review.



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