

# Coventry Local Plan Review

## Regulation 19

### Proposed Submission (Publication) Stage Representation Form

(guidance note below)

Ref:

(For official use only)

Name of the Plan  
to which this  
representation  
relates:

**Coventry Local Plan Review – Regulation 19 Proposed  
Submission (Publication)**

**Please return to Coventry City Council in writing or electronically by 23:59 03 March 2025** email to [planningpolicy@coventry.gov.uk](mailto:planningpolicy@coventry.gov.uk), via our consultation portal <https://coventrycitycouncil.inconsult.uk/system/home> or by post to Planning Policy Team, PO Box 7097, Coventry, CV6 9SL

Please refer to the following data protection/privacy notice:  
[www.coventry.gov.uk/planningpolicyprivacynotice](http://www.coventry.gov.uk/planningpolicyprivacynotice)

Please also note that a copy of your representation(s) will be made available to the Planning Inspectorate and to the person appointed by the Secretary of State to conduct the examination (i.e. the Inspector) and the Programme Officer. and that your representation(s) will be 'made available' in line with the Regulations (The Town and Country Planning (Local Planning) (England) Regulations 2012 – Regulations 20, 22 and 35). This includes publication on Coventry City Councils website (personal details will be redacted in line with the Privacy Notice).

This form has two parts:

**Part A** – Personal Details: need only be completed once.

**Part B** – Your representation(s).

**Please fill in a separate sheet for each representation you wish to make.**

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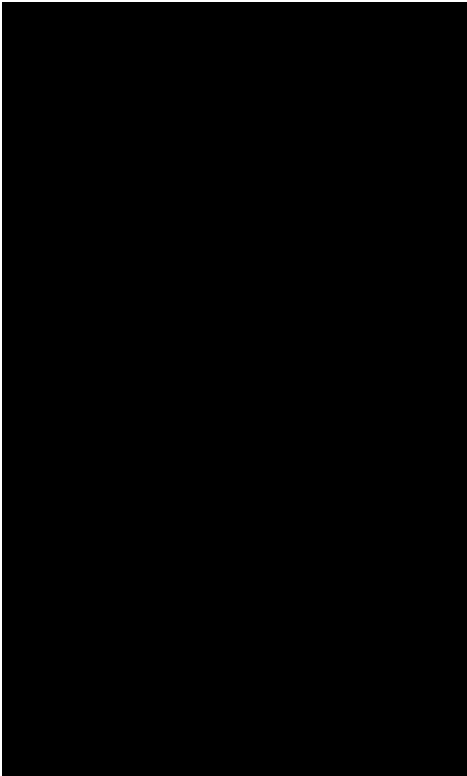
## Part A

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### 1. Personal Details\*

### 2. Agent's Details (if applicable)

*\*If an agent is appointed, please complete only the Title, Name and Organisation (if applicable) boxes below but complete the full contact details of the agent in 2.*

|                                  |                                                                                      |                                                                                      |
|----------------------------------|--------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|
| Title                            | <input type="text" value="Mr"/>                                                      | <input type="text" value="Mrs"/>                                                     |
| First Name                       | <input type="text" value="Nick"/>                                                    | <input type="text" value="Lucy"/>                                                    |
| Last Name                        | <input type="text" value="Buxton"/>                                                  | <input type="text" value="White"/>                                                   |
| Job Title<br>(where relevant)    | <input type="text"/>                                                                 | <input type="text" value="Director"/>                                                |
| Organisation<br>(where relevant) | <input type="text" value="National Grid Electricity Distribution (South West) Plc"/> | <input type="text" value="Lucy White Planning Limited"/>                             |
| Address Line 1                   | <input type="text"/>                                                                 |  |
| Line 2                           | <input type="text"/>                                                                 |                                                                                      |
| Line 3                           | <input type="text"/>                                                                 |                                                                                      |
| Line 4                           | <input type="text"/>                                                                 |                                                                                      |
| Post Code                        | <input type="text"/>                                                                 |                                                                                      |
| Telephone Number                 | <input type="text"/>                                                                 |                                                                                      |
| E-mail Address                   | <input type="text"/>                                                                 |                                                                                      |

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**Part B – Please use a separate sheet for each representation**

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Name or Organisation:

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

Paragraph  Policy

4. Do you consider the Local Plan Review is:

|                                             |     |                                     |    |                                     |
|---------------------------------------------|-----|-------------------------------------|----|-------------------------------------|
| (1) Legally compliant                       | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/>            |
| (2) Sound                                   | Yes | <input type="checkbox"/>            | No | <input checked="" type="checkbox"/> |
| (3) Complies with the<br>Duty to co-operate | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/>            |

Please tick as appropriate.

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

Please see attached letter.

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

6. Please set out the modification(s) you consider necessary to make the Local Plan Review 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 Review 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.

Please see attached letter.

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

**Please note:** In your representation you should provide succinctly all the evidence and supporting information necessary to support your representation and your suggested modification(s). You should not assume that you will have a further opportunity to make submissions.

**After this stage, further submissions may only be made if invited by the Inspector, based on the matters and issues they identify for examination.**

7. To which part of the Sustainability Appraisal (SA) report does this representation relate?

Paragraph

Please add any further comments relating to the SA report in the box below

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

8. If your representation is seeking a modification to the plan, do you consider it necessary to participate in examination hearing session(s)?

☒

**No**, I do not wish to participate in hearing session(s)

☐

**Yes**, I wish to participate in hearing session(s)

**Please note** that while this will provide an initial indication of your wish to participate in hearing session(s), you may be asked at a later point to confirm your request to participate.

9. If you wish to participate in the hearing session(s), please outline why you consider this to be necessary:

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

**Please note** the Inspector will determine the most appropriate procedure to adopt to hear those who have indicated that they wish to participate in hearing session(s). You may be asked to confirm your wish to participate when the Inspector has identified the matters and issues for examination.