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| For Office Use:  **Please Do Not Complete** |
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**Public Consultation – Rooley Moor Neighbourhood Development Plan**

**Friday 8th February to Friday 22nd March 2019**.

**COMMENTS FORM**

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| **Rooley Moor Neighbourhood Forum have produced a Neighbourhood Development Plan.**  Please use this comment form to register your comments and views on the Neighbourhood Development Plan and/or associated supporting documents. |

**PART A YOUR DETAILS**

|  |  |  |
| --- | --- | --- |
|  | **1. Your Details** | **2. Agent Details *(if applicable)*** |
| **Title** |  |  |
| **Forename** |  |  |
| **Surname** |  |  |
| **Organisation**  (if relevant) |  |  |
| **Address** |  |  |
| **Postcode** |  |  |
| **Email Address** |  |  |
| **Telephone No.** |  |  |

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| **Your completed comment form should be sent to the Strategic Planning Service:**  **Email:** [**LDF.consultation@rochdale.gov.uk**](mailto:LDF.consultation@rochdale.gov.uk)  **Post:** Number One Riverside, Smith Street, Rochdale, OL16 1XU |
| **Comment Forms should be received no later than**  **5pm Friday 22nd March 2019** |

**Future Notification**

Do you wish to be notified of Rochdale Council’s decision to ‘make’ the Rooley Moor Neighbourhood Development Plan?(Y/N)

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| |  | | --- | | For Office Use:  **Please Do Not Complete** | | Ref No: | | Scanned: | | Acknowledged: |   **PART B - To which document does this representation**  **relate?**  **Please Note: If you are commenting on more than one document you will need to complete a separate online response form for each document.**   |  |  | | --- | --- | |  | **Rooley Moor Neighbourhood Development Plan 2018-2028** | |  | **Basic Conditions Statement (November 2018)** | |  | **Equalities Impact Screening Report** | |  | **Consultation Statement** | |  | **Designated Area Plan** | |  | **Strategic Environmental Assessment and Habitats Regulations Assessment Screening Report** | |  |  | | | | |
| **Please write your comments below** *(to help assist us in responding to your representation, it would be helpful if you could tell us which chapter/page number you are commenting on). Please continue on an additional sheet, if necessary.* | | | |
|  | | | |
| **Signed/Name:** |  | **Date:** |  |
| **Thank you for taking the time to participate in this consultation.** | | | |

**EQUAL OPPORTUNITIES MONITORING**

We want to ensure that we find out the views of all groups in the community. Please help us to do this by filling in the form below. It will be separated from the above reply and will not be used for any purpose other than monitoring.

**Please put an X in the appropriate boxes**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Do you live in the Borough?** | Yes |  | **Are you:** | Male |  |
| No |  | Female |  |

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| --- | --- | --- | --- | --- | --- |
| **Age Group** | Under 18 |  | **Are you registered disabled** | Yes |  |
| 18 – 60 |  | No |  |
| Over 60 |  |

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| --- | --- | --- | --- | --- | --- | --- |
| **My cultural / ethnic origin is:** | | | | | | |
| **White** | | **Asian or British Asian** | | | | |
| White British |  | Bangladeshi |  | Pakistani |  | |
| White Irish |  | Indian |  | Kashmiri |  | |
| Other (please describe) |  | Other (please describe) | | |  | |
|  | |  | | | | |
| **Black or Black British** | | **Mixed Race or Dual Heritage** | | | |
| African |  | White / Asian | | |  |
| Caribbean |  | White / Black Caribbean | | |  |
| Other (please describe) | | White / Black African | | |  |
|  | | Other (please describe) | | |  |
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