All comments must be received by 4pm 20 November 2019

PART A	Your Details	Agents details (if applicable)			
Full Name	MR CHRISTOPHER IAN JOHANSON				
Address		RECEIVED			
Postcode					
Telephone					
Email					
Organisation (if applicable)	SELF				
Position (if applicable)					
Date	7 NOV 2019				

PART B

Comment i

AGRAPIAN

HEWER SEVELOPMENT

To which part of the additional evidence (concerning Policy NE01 – Preserving the Gap Between Settlements) submitted in support of the Neighbourhood Plan does your representation relate?

Whole document?	Yes/No	Page/paragraph Number		
Do you suppo	ort, oppose, o	r wish to comment	on this paragraph? (Please tick one answer)
Support 🗆	Support	with modifications	Oppose 💆	Have Comments
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Whole document?	Yes/No	Page/paragraph Number					
Do you suppor	t, oppose, or	wish to comme	nt on	this parag	raph? (P	lease tick one answer)	
Support	Support w	vith modifications		Oppose		Have Comments	
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				(Co	ntinue o	n separate sheet if neces	sary)

If you have additional representations feel free to include additional pages. Please make sure any additional pages are clearly labelled/ addressed or attached.