**SAHAM TONEY NEIGHBOURHOOD PLAN REGULATION 14 CONSULTATION xx JUNE – xx AUGUST 2020**

**Your Details** (Please print legibly)

\* Required information

Your Name\*:

Which of the following are you answering as\*? (Please tick only one box)

|  |  |
| --- | --- |
|  | Someone who lives in the parish of Saham Toney |
|  | Someone who works, but does not live in the parish of Saham Toney |
|  | Someone who owns a business based in the parish of Saham Toney |
|  | Other (please state): |

Your business name if applicable:

If you work but don't live in the Parish, where do you work?

Email address\*:

First line of your address\*:

Your postcode\*:

Your telephone number (optional):

Your age \*:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |
| Under 16 | 17-24 | 25-35 | 36-55 | 56-65 | Over 65 | Prefer not to say |

**Your Response \***(Please tick only one box)

|  |  |
| --- | --- |
|  | I support the Plan without comment |
|  | I support the Plan, subject to the comments overleaf |
|  | I do not support the Plan, for the reasons given overleaf |

Please give any comments overleaf

**Your Comments** (please use a continuation sheet if necessary)

|  |
| --- |
|  |