

REPRESENTATION FORM

Draft Stone House Development Framework



We will accept photocopies of this form or you can download copies from the Councils website at: www.dartford.gov.uk. The consultation document can also be viewed on this website.

Please complete all relevant details and questions in Part A – you only need to do this once irrespective of how many comments you wish to make. Complete a Part B form for **every** comment you wish to make, remembering to insert your name or organisation’s name.

Part A

1. Personal Details

2. Agent Details (if applicable)

Title		
First Name		
Last Name		
Job Title (where relevant)		
Organisation (where relevant)		
Address Line 1		
Line 2		
Line 3		
Line 4		
Post Code		
Telephone No		
E-mail Address		
If you have an interest in a particular site or sites, please specify:		

Our Statement of Community Involvement said that we would review consultation methods. Questions 3-5 below are part of this review and relate to the consultation on the Stone House Development Framework.

3. Please indicate below how you became aware of this document and the consultation period.

4. Do you consider that this document was easy to read? How would you improve it?

**5 Were you provided with the information you needed to respond to this document?
How could this be improved?**

What will happen to my comments?

Your comments will be stored on the Council's database and will be used solely in connection with matters connected to the Stone House Development Framework.

Although your personal details will remain confidential, your name/organisation and comments may be made public.

The Council will carefully consider all relevant comments on the issues raised. In the light of these, a revised Stone House Development Framework document will be produced in early 2008.

**ALL RESPONSES MUST BE RECEIVED BY 5:00PM,
MONDAY 24th DECEMBER 2007**

Once completed; all forms should be sent to the following address:

Planning Policy Team
Dartford Borough Council
Civic Centre
Home Gardens
Dartford Kent
DA1 1DR

Email address: LDF@dartford.gov.uk

Further copies of this form are available:

- On the Council's website at www.dartford.gov.uk
- By telephone (01322) 343213
- Or you may photocopy this form.

CONSULTATION RESPONSE FORM

PART B

Name of (Organisation or Surname)

For Office use only
Ref No:

Your Comments

(Continue on a separate sheet if necessary)

CONSULTATION RESPONSE FORM

Your Comments

(Continue on a separate sheet if necessary)

Signature:

Date:

Data Protection Statement: The information you provide will be held and used by Dartford Borough Council, in accordance with the Data Protection Act 1998, to help in the preparation of the Dartford Local Development Framework and related planning policy issues. Your personal details will remain confidential, although your name/organisation and any comments you make may be made public.

**ALL RESPONSES MUST BE RECEIVED BY 5:00PM,
MONDAY 24TH DECEMBER 2007
EARLY COMMENTS ARE APPRECIATED**

If you or anybody you know requires this or any other council information in another language please contact us and we will do our best to provide this for you. Braille, Audio tape and large print versions of this document are available upon request.

Tel: 01322 343434

Fax: 01322 343432

Email: customer.services@dartford.gov.uk

Calls are welcome via typetalk

THANK YOU FOR YOUR INTEREST IN THIS CONSULTATION DOCUMENT

Equalities Monitoring

We want to find out if we are giving as good a service as we can to all customers. To help us do this, please complete the following form. The information we get from all replies will be held confidentially and will only be used for monitoring purposes.

Please tick the circles as appropriate

1. Ethnic Group:

White

- British
- Irish
- Any other white background

Mixed

- White and Black Caribbean
- White and Black African
- White and Asian
- Any other mixed background

Asian or Asian British

- Indian
- Pakistani
- Bangladeshi
- Any other Asian background

Black or Black British

- Caribbean
- African
- Any other Black background

Chinese

- Chinese

Other ethnic group

- Any other group

2. Sex:

- Male
- Female

3. Age:

- Under 16
- 16-19
- 20-24
- 25-59
- 60-64
- 65 and above

4. Do you have a disability?

Yes No

4a. If you do, what is the nature of your disability?

- Difficulty getting around
- Hearing difficulty
- Difficulty seeing
- Learning difficulty
- Mental health problems
- Other