

**SOUTH LENCHES NEIGHBOURHOOD PLAN COMMENT FORM  
REGULATION 14 CONSULTATION**

This form is for **South Lenches Neighbourhood Plan** Pre-Submission Consultation  
11th November to 23rd December 2025

Please return to South Lenches Parish Clerk at Church Lench Village Hall, off Main Street, Church Lench, Evesham, Worcestershire, WR11 4UQ  
or email to [clerk@southlenchesparishcouncil.org](mailto:clerk@southlenchesparishcouncil.org) by 23rd December 2025 at 17.00

**Data Protection: Please tick the box below if you agree to the Parish Council using the submitted data in relation to this consultation.** Your personal information will not be shared with any third party unless required to do so by law; data will be kept for the purpose it was collected and only for as long as necessary after which it will be deleted. If you wish for your personal data to be removed or have any queries please contact South Lenches Parish Council - [clerk@southlenchesparishcouncil.org](mailto:clerk@southlenchesparishcouncil.org)

I agree

This form has two parts –

- Part A** – Personal Details (Residents and Local Business)
- Part B** – Your representation(s)

**PART A**

- **Personal Details (Residents)**
- **Local Business - if you are completing this on behalf of a local business and are not a resident, please complete the title, your name and Organisation name along with the address of the Local Business.**

Title	
First Name	Last Name
Job Title (where relevant)	
Organisation (where relevant)	

Address Line 1	
Line 2	
Line 3	
Post Code	Telephone Number

## PART B

Name or Organisation:	
<b>3. To which parts of the neighbourhood plan does this representation relate?</b> <b>Please be as precise as possible to include page numbers, paragraph(s), Policy / Policies, maps</b>	
<b>4. Is your representation:</b> (1) Supporting (2) Objecting (3) Commenting  (There may be different sections of the Plan to which you want to both Support and Object / Comment. Please do include all your representations on the 1 feedback form)	
<b>5. Please give details of the grounds why you are supporting or objecting to the plan. Please be as precise as possible.</b> (Continue on a separate sheet /expand box if necessary)	

**6. Please set out what change(s) you consider necessary to make the plan able to proceed, related to any objections you have raised. You will need to say why this change will enable the plan to proceed. 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.** (Continue on a separate sheet /expand box if necessary)

Signature: