

Summary Leaflet Survey Form

Wolverhampton Local Plan, Issues & Preferred Options (Regulation 18) Consultation

Monday 26 February – Wednesday 10 April, 2024

We are inviting your views on the Wolverhampton Local Plan Issues & Preferred Options consultation.

We would encourage you to use the online response form at www.wolverhampton.gov.uk/localplan-respond that is designed to be quick and easy to complete, where you can answer the questions in the Issues & Preferred Options main document and make any other comments about the Wolverhampton Local Plan. A shorter survey about the Issues & Preferred Options summary leaflet is also available from the link.

Please visit the website www.wolverhampton.gov.uk/localplan where you will find the Issues & Preferred Options main document, summary leaflet and other information including evidence documents and an interactive map.

Paper copies of this response form, the main document and other documents (for reference), plus the summary leaflet are available at:

- Wolverhampton Civic Centre, St Peter's Square, Wolverhampton WV1 1SH
(at the business reception by the mayoral entrance)
- All of Wolverhampton's libraries www.wolverhampton.gov.uk/find-library

The consultation period begins on **Monday 26 February** and ends at **5pm on Wednesday 10 April, 2024**.

Completed digital versions of this comments form should be emailed to:

localplan@wolverhampton.gov.uk

or completed printed copies should be posted/ handed in to: Wolverhampton Local Plan, City Planning, City of Wolverhampton Council, St Peter's Square, Wolverhampton WV1 1RP

If you require any assistance in completing this form, or would like more information, please contact the Wolverhampton Local Plan Team at the above email address or Tel: **01902 551155**

1. This form has three parts:

- Part 1: Your responses to the Wolverhampton Local Plan Issues & Preferred Options Summary Leaflet Consultation Questions
- Part 2: a. Your Details & b. Equalities Monitoring Information (voluntary)
- Part 3: A Declaration which you will need to read and sign

2. Responses must include your name, address and if possible email address

3. Your comments cannot be treated as confidential. By completing this form, you agree to your details being shared and your name and comment (but not your address or other personal details) being made available for public viewing

4. It is recommended that groups that share a common view send a single response rather than multiple copies of the same response. Please attach a list of the contact details of each person who supports the comments, including their names, addresses and if possible their email addresses.

5. Completed forms should be received by us no later than **5pm on Wednesday 10 April, 2024**

6. Unfortunately individual acknowledgement of receipt will not be possible

Part 1: Summary Leaflet Consultation Questions

The questions below correspond to the questions set out in the Summary Leaflet. If you are completing this form electronically, text can be added in the boxes. If you are completing a printed version your responses can continue onto attached additional sheets of paper if required.

Question A: Do you agree with the “big issues” identified for the Wolverhampton Local Plan to address?

Yes No Don't know

Comments:

Question B: Do you agree with the Preferred Spatial Option for the Wolverhampton Local Plan?

Yes No Don't know

Comments:

Question C: Do you agree with the proposed site allocations for the Wolverhampton Local Plan?

Yes No Don't know

Comments:

Question D: Do you agree with the preferred approach to policies in the Wolverhampton Local Plan?

Yes No Don't know

Comments:

Question E: Do you have any other comments to make about the Wolverhampton Local Plan?

(please use the opportunity below to provide any further comments you wish to make on the Wolverhampton Local Plan Issues & Preferred Options consultation. This could include any responses to the Issues & Preferred Options Main Document and/ or other information, such as the Sustainability Appraisal, Interactive Map and supporting evidence. Please state clearly what aspect of the consultation you are referring to e.g. document/ page/ section/ question/ site reference/ policy area)

Yes No Don't know

Comments:

Part 2a: Your Details

	A. INDIVIDUAL OR (IF APPLICABLE) AGENT	B. ORGANISATION (IF APPLICABLE)
Name:*	<input type="text"/>	<input type="text"/>
Organisation Name (if applicable):	<input type="text"/>	<input type="text"/>
ADDRESS:*		
House/Building No./ Name:	<input type="text"/>	<input type="text"/>
Street:	<input type="text"/>	<input type="text"/>
Town:	<input type="text"/>	<input type="text"/>
City/County:	<input type="text"/>	<input type="text"/>
Postcode:	<input type="text"/>	<input type="text"/>
Telephone:	<input type="text"/>	<input type="text"/>
*Email:	<input type="text"/>	<input type="text"/>

Notes:

1. If you are responding as an individual (e.g. a resident) you do not need to fill in the organisation boxes unless you are responding as a member of an organisation.
2. If you are an individual or agent responding on behalf of a client please ensure that your details are completed in Column A and, as a minimum, the name and organisation boxes of the client you are responding on behalf of, are completed in Column B.
3. *Names, addresses and if possible email addresses must be provided

Part 2b: Equalities Monitoring Information (voluntary)

City of Wolverhampton Council as a public sector organisation has a responsibility to ensure that we do not unfairly discriminate in the services we provide and are accessible to everyone. In order to do this, the Council collects equality monitoring data.

Why do we want to know these things about you?

It is very important for City of Wolverhampton Council to collect information about respondents to understand whether the feedback we get from these surveys is representative of our resident population. You are welcome to complete these optional questions. The disclosure of this data is treated in the strictest confidence.

What is your postcode?

What is your age?

- | | | |
|-----------------------------------|----------------------------------|--|
| <input type="checkbox"/> Under 16 | <input type="checkbox"/> 35 – 44 | <input type="checkbox"/> Over 65 |
| <input type="checkbox"/> 16 – 24 | <input type="checkbox"/> 45 – 54 | <input type="checkbox"/> Prefer not to say |
| <input type="checkbox"/> 25 – 34 | <input type="checkbox"/> 55 – 64 | |

What is your sex? (a question about gender identity will follow)

- | | | |
|-------------------------------|---------------------------------|--|
| <input type="checkbox"/> Male | <input type="checkbox"/> Female | <input type="checkbox"/> Prefer not to say |
|-------------------------------|---------------------------------|--|

Is the gender you identify with the same as your sex registered at birth?

- | | | |
|------------------------------|-----------------------------|--|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Prefer not to say |
|------------------------------|-----------------------------|--|

What best describes your gender?

- | | | |
|---------------------------------|---|--|
| <input type="checkbox"/> Female | <input type="checkbox"/> Non-binary | <input type="checkbox"/> Prefer not to say |
| <input type="checkbox"/> Male | <input type="checkbox"/> I use another term | |

What is your legal marital or registered civil partnership status?

- | | |
|---|---|
| <input type="checkbox"/> Never married and never registered a civil partnership | <input type="checkbox"/> Divorced |
| <input type="checkbox"/> Married | <input type="checkbox"/> Formally in a civil partnership which is now legally dissolved |
| <input type="checkbox"/> In a registered civil partnership | <input type="checkbox"/> Widowed |
| <input type="checkbox"/> Separated, but still legally married | <input type="checkbox"/> Surviving partner from a registered civil partnership |
| <input type="checkbox"/> Separated, but still legally in a civil registered partnership | <input type="checkbox"/> Prefer not to say |

What is your legal marital or registered civil partnership status?

- | | |
|--|---|
| <input type="checkbox"/> English, Welsh, Scottish, Northern Irish or British | <input type="checkbox"/> Any other Black, Black British or Caribbean background |
| <input type="checkbox"/> Irish | <input type="checkbox"/> Arab |
| <input type="checkbox"/> Gypsy or Irish Traveller | <input type="checkbox"/> White and Asian |
| <input type="checkbox"/> Roma | <input type="checkbox"/> Any other Mixed or Multiple background |
| <input type="checkbox"/> Any other white background | <input type="checkbox"/> Indian |
| <input type="checkbox"/> White and Black Caribbean | <input type="checkbox"/> Pakistani |
| <input type="checkbox"/> White and Black African | <input type="checkbox"/> Bangladeshi |
| <input type="checkbox"/> Any other Asian background | <input type="checkbox"/> Chinese |
| <input type="checkbox"/> Caribbean | <input type="checkbox"/> Any other ethnic group |
| <input type="checkbox"/> African background | <input type="checkbox"/> Prefer not to say |

What is your religion?

- | | |
|--|---|
| <input type="checkbox"/> No Religion | <input type="checkbox"/> Jewish |
| <input type="checkbox"/> Christian (including Church of England, Catholic, Protestant and all other Christian denominations) | <input type="checkbox"/> Muslim |
| <input type="checkbox"/> Buddhist | <input type="checkbox"/> Sikh |
| <input type="checkbox"/> Hindu | <input type="checkbox"/> Any Other Religion |
| | <input type="checkbox"/> Prefer not to say |

Do you have any, disabilities, physical or mental health conditions or illnesses lasting or expected to last 12 months or more?

- Yes No Prefer not to say

What best describes your sexual orientation?

- Straight Bisexual Prefer not to say
 Gay/Lesbian I use another term

Do you have an armed forces connection in the past or present day?

- Currently a full-time member of the Armed Forces Previous Service in Armed Forces No
 Currently a Reservist A Military spouse/partner Prefer not to say

Part 3: Declaration

How we will use your personal information

The personal information you provide on this form will be processed in accordance with the requirements of the Data Protection Act 2018 and UK General Data Protection Regulation (UK GDPR). The information you provide will only be used for the purposes of the preparation of the Local Plan as required by the Planning and Compulsory Purchase Act 2004, and may be used by the council to contact you if necessary regarding your submission, such as to clarify your consultation responses. Your name, organisation and comments will be made available for public viewing when displaying and reporting the outcome of the statutory consultation stage and cannot be treated as confidential. You will not be asked for any unnecessary information and in order to protect personal data and confidentiality, we will not publish signatures, telephone numbers, postal addresses, email addresses or any equality monitoring data. Your details will be kept until the Local Plan is adopted plus a further ten years to evidence that a fair and transparent process has been followed. Processing is kept to a minimum and data will only be processed in accordance with the law. When other agencies are involved in Local Plan preparation, we may need to share details about you to enable us to work together for your benefit. Information will only be shared with third parties if they have genuine and lawful need for it. Information shared on this basis will not be reused for any other purpose. We will take all reasonable precautions to protect your personal data from accidental or deliberate loss or unauthorised disclosure.

DECLARATION

By completing and signing this form, I agree to my name, organisation and representations being made available for public inspection on the internet. Please sign and date this form below. Forms signed electronically will be accepted.

Signature:

Date:

I understand that in submitting my representations, that my details will be added to the Local Plan Consultation database for Wolverhampton and I may be contacted at future stages of the Local Plan process. All personal data will be processed in accordance with the Data Protection Act 2018 and the UK GDPR. If you do not wish to be contacted further, please tick the box below:

I would prefer not to be contacted in future about the Local Plan

A copy of our privacy notice is available from www.wolverhampton.gov.uk/localplan

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St Peter's Square
Wolverhampton
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Please submit your comments form by **5pm Wednesday 10 April, 2024**. Thank you.

You can get this information in large print, braille, audio or in another language by calling 01902 551155 or emailing translations@wolverhampton.gov.uk

wolverhampton.gov.uk 01902 551155



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City of Wolverhampton Council, Civic Centre, St. Peter's Square, Wolverhampton WV1 1SH