1. OUR DETAILS
Consultation start date: 9am on 18 January 2016
Consultation closing date: 5pm on 28 February 2016
Respond online: http://cambridge.jdi-consult.net/localplan
Email: policiesurveys@cambridge.gov.uk
Write to:
Planning Policy
Cambridge City Council
PO Box 700
Cambridge
CB1 0JH
Find out more:
https://www.cambridge.gov.uk/ridgeons-spd

2. YOUR DETAILS
Please note that we cannot register your representation without your details
Please tick if you are an agent  
If you are an agent, who are you representing?  
Contact Name:  
Contact Address:  
Email:  
Signature:  
Date:  
Please tick if you do not wish to be contacted via email  
Please tick if you wish to be updated on the progress of this document  
3. Paragraph number, section, plan, figure, bullet point etc.

4. Do you support this paragraph or section?

☐ Yes, I support
☐ No, I object

5. Your Comments: why do/don't you support the paragraph or section? If you’d like to amend or add something new, what would it say? Please limit your response below to 100 words. Detailed comments may be provided on separate sheets, if necessary

Note: If you wish to comment on more than one paragraph or section please use another form

Data Protection

The information collected will be processed in accordance with the Data Protection Act 1998. Information from the forms will be stored on a computer database used solely in connection with the Local Plan Review and the production of planning policy documents. Representations will be available to view on council’s website, although address and contact details will not be included. However, as copies of representations must be made available for public inspection, they cannot be treated as confidential and will be available for inspection in full.
Monitoring Information

It would help us if you could complete this section on monitoring and return it with your representation(s). You only need to fill this form in once if you are sending back multiple copies of the Response Form. The information supplied will help us to ensure that we are reaching a cross section of the local community.

Please tick all which are applicable to you.

<table>
<thead>
<tr>
<th>Age:</th>
<th>Under</th>
<th>16-24</th>
<th>25-34</th>
<th>35-44</th>
<th>45-54</th>
<th>55-64</th>
<th>65+</th>
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<tbody>
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</tbody>
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Gender: Male ☐ Female ☐

Status:

| Economically Active | Employed ☐ Self-employed ☐ Unemployed ☐ Full-time Student ☐ |

| Economically Inactive | Retired ☐ Student ☐ Looking after home/family ☐ Permanently sick/disabled ☐ Other ☐ |

Ethnicity:
To which of these groups do you consider that you belong?

A) White British ☐ Irish ☐ Any other White Background ☐

B) Mixed White and black Caribbean ☐ White and black African ☐ White and Asian ☐ Any other mixed background ☐

C) Asian or Asian British Indian ☐ Pakistani ☐ Bangladeshi ☐ Any other Asian background ☐

D) Black or Black British Caribbean ☐ African ☐ Any other Black background ☐

E) Chinese Chinese ☐

F) Gypsies and Travellers Roma ☐ Irish Travellers ☐ Any other Travellers ☐ Travelling Show People ☐

G) Other Ethnic Background Other ☐
Religion:
To which of these groups do you consider that you belong?

A) None
B) Christian
C) Buddhist
D) Hindu
E) Jewish
F) Muslim
G) Sikh
H) Any other
   (Please state religion: _______________)

Do you have a disability?

Yes □ No □