



CITY OF WAKEFIELD METROPOLITAN DISTRICT COUNCIL LOCAL DEVELOPMENT FRAMEWORK

Form for Commenting on Issues & Options and Initial Sustainability Appraisal

* Completed forms should be returned by Monday 28th February 2005 to:

Wakefield MDC,
Spatial Policy Group
Regeneration & Housing Services,
PO Box 92,
Newton Bar,
Wakefield, WF1 1XS

For official use. Reference No.	
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PLEASE USE BLOCK CAPITALS

Details of the person making the comment:

Title:	Initials:	Surname:
Organisation:		
Property No. / Name:		
Street Name (1)		
Street Name (2)		
Locality		
Town		
Post Code:		
E-mail:		

If you have appointed someone to act as your Agent please give their details below:

Title:	Initials:	Surname:
Company:		
Property No. / Name:		
Street Name (1)		
Street Name (2)		
Locality		
Town		
Post Code:		
E-mail:		

Pages 2 to 4 ask for details of the comments you wish to make. Please read the notes at the top of each page before replying. Please note that replies can not be kept confidential. A summary of responses will be made available publicly. Page 5 asks you to provide some details about yourself for monitoring purposes only.

Please tick the box if you wish to be kept informed about the Local Development Framework:

Please sign and date the form:

Date: _____

The Issues and Options Report includes 46 questions on which we would like your views. 28 of these are also included in the Summary Report. The question numbers are listed below. Please state whether you 'agree' or 'disagree' with the statement in each question. You can provide more details on the next page.

(tick appropriate box)

Question	Agree	Disagree
1.	<input type="checkbox"/>	<input type="checkbox"/>
2.	<input type="checkbox"/>	<input type="checkbox"/>
3.	<input type="checkbox"/>	<input type="checkbox"/>
4.	<input type="checkbox"/>	<input type="checkbox"/>
5.	<input type="checkbox"/>	<input type="checkbox"/>
6.	<input type="checkbox"/>	<input type="checkbox"/>
7.	<input type="checkbox"/>	<input type="checkbox"/>
8.	<input type="checkbox"/>	<input type="checkbox"/>
9.	<input type="checkbox"/>	<input type="checkbox"/>
10.	<input type="checkbox"/>	<input type="checkbox"/>
11.	<input type="checkbox"/>	<input type="checkbox"/>
12.	<input type="checkbox"/>	<input type="checkbox"/>
13.	<input type="checkbox"/>	<input type="checkbox"/>
14.	<input type="checkbox"/>	<input type="checkbox"/>
15.	<input type="checkbox"/>	<input type="checkbox"/>
16.	<input type="checkbox"/>	<input type="checkbox"/>
17.	<input type="checkbox"/>	<input type="checkbox"/>
18.	<input type="checkbox"/>	<input type="checkbox"/>
19.	<input type="checkbox"/>	<input type="checkbox"/>
20.	<input type="checkbox"/>	<input type="checkbox"/>
21.	<input type="checkbox"/>	<input type="checkbox"/>
22.	<input type="checkbox"/>	<input type="checkbox"/>
23.	<input type="checkbox"/>	<input type="checkbox"/>
24.	<input type="checkbox"/>	<input type="checkbox"/>
25.	<input type="checkbox"/>	<input type="checkbox"/>
26.	<input type="checkbox"/>	<input type="checkbox"/>
27.	<input type="checkbox"/>	<input type="checkbox"/>
28.	<input type="checkbox"/>	<input type="checkbox"/>

(tick appropriate box)

Question	Agree	Disagree
29.	<input type="checkbox"/>	<input type="checkbox"/>
30.	<input type="checkbox"/>	<input type="checkbox"/>
31.	<input type="checkbox"/>	<input type="checkbox"/>
32.	<input type="checkbox"/>	<input type="checkbox"/>
33.	<input type="checkbox"/>	<input type="checkbox"/>
34.	<input type="checkbox"/>	<input type="checkbox"/>
35.	<input type="checkbox"/>	<input type="checkbox"/>
36a	<input type="checkbox"/>	<input type="checkbox"/>
36b	<input type="checkbox"/>	<input type="checkbox"/>
36c	<input type="checkbox"/>	<input type="checkbox"/>
36d	<input type="checkbox"/>	<input type="checkbox"/>
37.	<input type="checkbox"/>	<input type="checkbox"/>
38.	<input type="checkbox"/>	<input type="checkbox"/>
39.	<input type="checkbox"/>	<input type="checkbox"/>
40.	<input type="checkbox"/>	<input type="checkbox"/>
41.	<input type="checkbox"/>	<input type="checkbox"/>
42.	<input type="checkbox"/>	<input type="checkbox"/>
43.	<input type="checkbox"/>	<input type="checkbox"/>
44.	<input type="checkbox"/>	<input type="checkbox"/>
45a	<input type="checkbox"/>	<input type="checkbox"/>
45b	<input type="checkbox"/>	<input type="checkbox"/>
45c	<input type="checkbox"/>	<input type="checkbox"/>
45d	<input type="checkbox"/>	<input type="checkbox"/>
45e	<input type="checkbox"/>	<input type="checkbox"/>
45f	<input type="checkbox"/>	<input type="checkbox"/>
45g	<input type="checkbox"/>	<input type="checkbox"/>
45h	<input type="checkbox"/>	<input type="checkbox"/>
45i	<input type="checkbox"/>	<input type="checkbox"/>
45j	<input type="checkbox"/>	<input type="checkbox"/>
46	<input type="checkbox"/>	<input type="checkbox"/>

To help us to be sure that we are reaching all sections of the community we would like you to provide some details about yourself. This information will be used for monitoring purposes only and individual responses will not be disclosed.

(tick appropriate boxes)

Male Female

Age: Under 16
16 – 24
25 – 59
60 and Over

Are you disabled or do you suffer from a limiting long term illness? Yes No

Please state which Ethnic Group you belong to:

The Wakefield Metropolitan District Council will treat any information by which you can be identified in accordance with the Data Protection Act 1998. The Council will only use the information provided in the responses for the purpose of preparing the Local Development Framework.