# NORTH WEST LEICESTERSHIRE



# DISTRICT COUNCIL

# NEIGHBOURHOOD PLAN

# PRE-DESIGNATION FORM

Please complete the form fully.

|  |  |
| --- | --- |
| **Organisation:** |  |
| **Address:** |  |
| **County:** |  | **Postcode:** |  |
| **e-mail:** |  | **Telephone:** |  |

Organisation Type (please tick one):

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Parish/Town Council** |  |  | **Neighbourhood Forum** |  |

Please describe your organisation’s aims and financial structure in relation to Neighbourhood Planning. Please list all other organisations or local groups that you are/will be working with to undertake your Neighbourhood Plan. Have you created a Terms of Reference for this work?

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# Details of your Neighbourhood Plan

Tell us why you want to do a Neighbourhood Plan and what work you have done so far.

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| Tell us why you want to do a Neighbourhood Plan and what you want to achieve. |

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| Please explain why a Neighbourhood Plan is needed; please include in this section any community consultation that has taken place so far. |

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| Please tell us about the work have you done so far. |

What geographical area will your Neighbourhood Plan cover? (a map can be provided by NWLDC, please indicate if this is required).

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Have you started to prepare a programme for your Neighbourhood Plan? (this is likely to include: the tasks that need to be undertaken at each stage, the resources needed, a timeline etc.)

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| --- | --- | --- | --- | --- |
| **Yes** |  |  | **No** |  |

Tell us when you hope to start and finish your Neighbourhood Plan.

|  |  |  |  |
| --- | --- | --- | --- |
| **Estimated start date:** |  | **Estimated finish date:** |  |

# Resources

Tell us what resources you currently have and what resources you think you will need.

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| --- | --- |
| What we have | What we need |
| *Examples: (A room to hold meetings, an active and supportive committee to lead the plan)* |  |

Resources available (A)/required (R) and anticipated costs (this information will help to inform any grant applications that you may be eligible to apply for).

|  |  |  |
| --- | --- | --- |
| **Item** | **Description** | **Estimated Cost** |
| *Examples**Project administration support (A)**Planning Policy – expertise (R)**Neighbourhood Planning Consultation Events (R)* |  |  |
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|  |  |  |
|  |  |  |
| **Total anticipated cost:** | **£** |
|  | **Anticipated shortfall in funding** | **£** |

### Applicants Resources (Match funding)

Please say where the remaining funds will come from, including grants requested or obtained from other organisations. Include in-kind contributions (as appropriate and eligible).

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| --- |
| *Example**Plan Administration - Parish Clerk (half day per week) – Parish Council contribution**Neighbourhood Plan volunteers (x volunteers at x days per week)* |

Additional information in support of your Neighbourhood Plan.

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# Declaration

To the best of my knowledge the information supplied with this form is correct.

|  |  |
| --- | --- |
| Signed: |  |
| Position (e.g. Parish Clerk, Forum Secretary, Chairman/Mayor): |  |
| Date: |  |

Please list any enclosures sent with this form (for example: Terms of Reference, minutes of meetings, evidence of need, Neighbourhood Plan Programme etc.)

|  |  |
| --- | --- |
| 1: |  |
| 2: |  |
| 3: |  |
| 4: |  |
| 5: |  |
| 6: |  |

## Please return this form to:

Stonger and Safer Communities Team (Community Focus)

North West Leicestershire District Council

Council Offices

Coalville

Leicestershire

LE67 3FJ

If you have any queries about the form, please contact us on:

Tel - 01530 454769 email - community.focus@nwleicestershire.gov.uk