



Application to designate a Neighbourhood Area

**Town and Country Planning Act 1990
Neighbourhood Planning (General) Regulations 2012 (as amended)**

Parish clerk details

Title	Mr
First name	Steve
Last name	Stegman
Property name/number	Old House Cottage
Address line 1	The Green
Address line 2	Ashbocking
Town/Village	Ipswich
County	Suffolk
Postcode	IP6 9JZ
Email address	clerk.ashbocking@btinternet.com

Additional contact details (if different)

Title	
First name	
Last name	
Property name/number	
Address line 1	
Address line 2	
Town/Village	
County	
Postcode	
Email address	

Relevant body

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Confirmation that you are the relevant body to undertake neighbourhood planning in your area in accordance with the regulations	Yes
District	Mid Suffolk District Council
Parish	Ashbocking
If adjacent LA/Parish was selected these details have been provided	
Name of neighbourhood area	
Name by which the neighbourhood area will formally be known	Ashbocking
Extent of the area	
Intended extent of the area	Whole parish boundary area
Is assistance with an OS plan required	Yes
To satisfy Regulation 5 of the Neighbourhood Planning (General) Regulations 2012 the following statement has been provided to explain why the area being proposed is considered appropriate:	
The residents expressed a desire to control the development of the village so that the essential characteristics which brought them to the village can be maintained.	
Intention of neighbourhood area	
The following is intended to be undertaken within the neighbourhood area	Neighbourhood Development Plan
Support provided for this choice:	
The Neighbourhood Plan has been discussed at the last two Annual Parish meetings where a large majority of attendees voted to produce a plan. There is a strong sense of community in the village and the plan would help channel that community spirit.	
Adjoining parish clerk details (multi-parish areas)	
Details of adjoining parish or parishes clerk details if provided	
Declaration	
I/we hereby apply to designate a neighbourhood area as described on this form and on the accompanying plan.	
Name(s)	S G Stegman
Date	06/11/2019