# Community Governance Review – Onehouse and Stowmarket



The recommendations that we are seeking your opinions on, are:

# Decline the request for the Union Road Development and Areas A, B and C to become part of Stowmarket and for boundaries to remain as they currently are – no change.

Please tell us your views by completing the questions below.

# Using your personal information

Any information provided in this survey will be used in the strictest confidence and only for the use of the community governance review.

For further information on how we collect, use, share, secure and retain your personal information, and your legal rights, please see our Privacy Notice at <a href="https://www.midsuffolk.gov.uk/privacy-policy">https://www.midsuffolk.gov.uk/privacy-policy</a>

# **Residency/Locality**

# Q1 Please state which of the following best describes you?

I live in Onehouse or Stowmarket (please state your home postcode below)

I work in Onehouse or Stowmarket (please state your workplace postcode below)

I own a business in Onehouse or Stowmarket (please state your business postcode below)

I am a representative of a community organisation in Onehouse or Stowmarket (Please state which one below)

Other

Please state your postcode:

Please state community organisation:

Please state other:

#### **Recommendation Views**

Q2 Option 1 - Agree to decline the request for the Union Road Development and Areas A, B and C to become part of Stowmarket and for boundaries to remain as they currently are – no change.

Option 2 - Disagree to decline the request for the Union Road Development and Areas A, B and C to become part of Stowmarket and for boundaries to be moved to reflect the change. The areas stipulated within the draft recommendations would subsequently be moved into the Stowmarket Town area.

Q2 Which of the above options is your preferred option?

Option 1 (Agree)please go to question 3Option 2 (Disagree)Please go to question 4Some other optionPlease go to question 5Don't know / not surePlease go to question 6

Please tick only one option

#### Q3 Please tell us why you chose option 1

#### Q4 Please tell us why you chose option 2

# Q6 Please tell us why you don't know or are not sure on which option you prefer?

# Q7 Are there any further comments you would like to add about the Community Governance Review?

# **Contact details**

If you would like to be kept informed on the Community Governance Review and notified for comments in any future developments of the final recommendations following this further consultation, please provide your name and preferred contact details below.

Name:		
Address:		
Email:		
Demographic Da	ta	
Age		
Which age cates 16 - 19 20 - 29 30 - 39	gory are you in? 40 - 49 50 - 59 60 - 69	<ul> <li>70 - 79</li> <li>80+</li> <li>Prefer not to say</li> </ul>
Disability		
Do you consider condition?	r yourself to be a disabled person or to have	e a long-term, limiting

Thank you for taking the time to complete this survey.

