## APPLICATION FOR THE DESIGNATION OF A NEIGHBOURHOOD PLAN AREA

## NAME OF THE RELEVANT ORGANISATION

ALFORD TOWN COUNCIL

**CONTACT ADDRESS** 

CORN EXCHANGE,
MARKET PLACE,
ALFORD,
LINCS LNIB DEB

## **STATEMENT**

(please give a short statement explaining why your area should be considered appropriate to be designated as a neighbourhood area)

ALFORD IS A SMALL MARKET TOWN WITH SPECIFIC CHARACTERISTICS. IT SHOULD BE DESIGNATED AS A NEIGHBOURHOOD AREA TO ENSURE DEVELOPMENT OF BUILDINGS, BUSINESSES AND HOUSES IN THE TOWN ARE APPROPRIATE FOR THE AREA, AND MEET THE NEEDS OF RESIDENTS, BUSINESSES AND ORGANISATIONS.

Are you a designated Town or Parish Council (Please state yes or no)

YES.

Signature of authorised person

Linda Crafe.

Position in organisation

TOWN CLERK

Date 11/4/2012.