

Cophthorne Neighbourhood Plan Second Housing Survey

Dear Resident, Some time ago we carried out a survey in order to gauge the future housing and business needs within the village. As we approach the time for final submission of the plan, we need to update that survey. We ask you therefore, to complete this short survey and return it to one of the designated collection points. These are the Parish Hub (Worth Parish Council Offices) adjacent to St John the Evangelist Church, Oliver’s Wines and Café, or at the Post Office. **All data processed will remain anonymous** and confidential, but we do ask you to verify that you live or work in the village by completing the Verification Question. Only one response form is required from each residence or business. **All data will be processed in accordance with the Data Protection Act**

1. Verification code. What is your postcode _____
and the name/number of your property _____

These questions are about the principal residents at the property. **Where there are options boxes please tick one box only.**

2. Is your property

Owned by you	
Rented	
Shared Ownership	
Other	

3. How many bedrooms does your property have?
(Tick one box only)

None. This is a business property	
1	
2	
3	
4 or more	

4. Do you currently run a business from this residential home? ***This data will be treated as confidential and will be anonymous.***

Yes No This is a non-residential business address

5. Are you looking for small business premises in the village within the next 10 years

Yes No

6. If yes, within 5 years within 6-10 yrs.

7. How many years have you lived at this address?

0-5	
6-10	
11-20	
21+	

8. For **each of the age groups** in the table below, please state the **number** of residents at this address.

0-30	
31-50	
51-70	
71+	

9. What made you decide to live in Cophthorne? (Tick one box only)

Born here	
I have relatives who live nearby	
My place of work is in the village or nearby, or commuting to my place of work is easy.	
I am attracted to Village life	
Other	

10. As the principal person at your address, do you think that you will move (Tick one box only)

I expect to move within 5 years	
I expect to move within 6-10 years	
I expect to move, but not for at least 10 years	

11. When you move, would you want to move within Cophthorne? (Tick one box only)

Not applicable. I do not expect to move	
Yes, I want to stay in Cophthorne	
No, I expect to leave the area	

12. What would be your reason for moving? (Tick one box only)

Move to a larger home	
Move to a smaller home	
Move to a better location (Residential or business)	
Financial reasons (Work related, Investment in property, release equity or other reason related to finance)	
Other	

13. Do you want your next home to be (Tick one box only)

Owner occupier (with or without a mortgage)	
Rented	
Shared ownership	
Social Housing	

14. This question is about others who live at your address. It is possible that some of those who currently live at this address, other than the principal residents, will want to move to a home of their own within the next 10 years. Please indicate for each new home required ticking the relevant boxes

New home	Will this new home be within Copthorne	When	What type of ownership is most likely	Minimum number of Bedrooms
New Home A	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 0-5Yrs <input type="checkbox"/> 6-10 Yrs.	<input type="checkbox"/> Owner occupier <input type="checkbox"/> Rent <input type="checkbox"/> Shared ownership <input type="checkbox"/> Social Housing <input type="checkbox"/> Other	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 or more
New Home B	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 0-5Yrs <input type="checkbox"/> 6-10 Yrs.	<input type="checkbox"/> Owner occupier <input type="checkbox"/> Rent <input type="checkbox"/> Shared ownership <input type="checkbox"/> Social Housing <input type="checkbox"/> Other	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 or more
New Home C	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 0-5Yrs <input type="checkbox"/> 6-10 Yrs.	<input type="checkbox"/> Owner occupier <input type="checkbox"/> Rent <input type="checkbox"/> Shared ownership <input type="checkbox"/> Social Housing <input type="checkbox"/> Other	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 or more
New Home D	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 0-5Yrs <input type="checkbox"/> 6-10 Yrs.	<input type="checkbox"/> Owner occupier <input type="checkbox"/> Rent <input type="checkbox"/> Shared ownership <input type="checkbox"/> Social Housing <input type="checkbox"/> Other	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 or more
New Home E	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 0-5Yrs <input type="checkbox"/> 6-10 Yrs.	<input type="checkbox"/> Owner occupier <input type="checkbox"/> Rent <input type="checkbox"/> Shared ownership <input type="checkbox"/> Social Housing <input type="checkbox"/> Other	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 or more

15. This question is about relatives or close friends, who do not currently live in Copthorne, but who would like to move into Copthorne within the next 10 years

Family A		Family B		Family C	
When is this likely to happen	How many bedrooms will this family need	When is this likely to happen	How many bedrooms will this family need	When is this likely to happen	How many bedrooms will this family need
<input type="checkbox"/> 0-5Yrs <input type="checkbox"/> 6-10 Yrs.	<input type="checkbox"/> They are moving in with me at my present address <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 or more	<input type="checkbox"/> 0-5Yrs <input type="checkbox"/> 6-10 Yrs.	<input type="checkbox"/> They are moving in with me at my present address <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 or more	<input type="checkbox"/> 0-5Yrs <input type="checkbox"/> 6-10 Yrs.	<input type="checkbox"/> They are moving in with me at my present address <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 or more