

05 AUG 2024

PUBLIC RIGHT OF WAY USER EVIDENCE STATEMENT

BEFORE COMPLETING THIS FORM PLEASE SEE THE NOTES AT THE END

Personal Details

Name:

Address:

Post Code:

NK34 ONJ...

Date of Birth:

16 Nov 1954

Telephone No:

Email Address:

Occupation: (if retired, give former occupation)

Identification of the Alleged Route

Description of the Route (Mark route on map attached)

Start Grid Reference: NZ35965 67478

End Grid Reference: NZ35933 67745

Name of Route (if named): England Coastal Path Section SBA-1S031

Believed Status of the Route Existing Footpath & National Trail
(Footpath, Bridleway, Restricted Byway or Byway Open to All Traffic)

Has the route always run on the same route? (If not provide details)

YES.

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Your Use of the Alleged Route

When did you first use the route?

Prior to 2020

When did you last use the route?

2 or 3 days before it was closed.

Was there a period between those dates that you did not use the route (If yes, when & why?)

No, I used it constantly

How did you use the route? (e.g. foot, horse, cycle, carriage, motor vehicle)

Mainly walking and cycling.

How often did you use the route?

5 days per week (exercise route)

If you have stopped using the route, why did you stop?

Access was blocked.

The Nature of Your Use

What was the purpose of your journeys?

It was my exercise

route.

Did you see other people using the route?

Yes, it was in constant use

Did other people see you using the route?

Yes, almost every day

of the week.

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Did you encounter or have to remove any obstructions when using the route? (e.g. fences, locked gates etc.) (If yes give details)

No (UNTIL CLOSURE)

Did you ever ask for permission to use the route? (If yes give details)

No

Were you ever given permission to use the route? (If yes give details)

No

Have you ever owned/occupied land crossed by the route?

No

Have you ever worked for the owner/occupier of the land?

No

If yes, were you ever given any instructions regarding the route? (If yes give details)

No

Additional Information

Were there any stiles, gates or bridges along the route? (If yes, show locations on map)

No

Were there any signs along the route? (If yes, give details & show locations on map)
England Coastal Path Signs, which have now been changed without any permission.

Were you ever stopped, prevented, or turned back from using the route? (If yes, give details)

No

(UNTIL CLOSURE)

Any other information you consider relevant

I hereby certify that to the best of my knowledge and belief the facts that I have stated are true

Signature:

[Redacted Signature]

Date:

1-8-24

Signature of person taking statement: (If applicable)

[Redacted Signature]

Print Name:

[Redacted Name]

Note:

1. You may be interviewed by the investigating Authority to confirm the content of this form
2. You may also be asked to attend a public inquiry to give evidence
3. The information contained within this form will be in the public domain and may be disclosed to other parties with an interest in this case. By completing this form, you are confirming you consent for such disclosure. This includes the personal details given.
4. If your recollections of dates and other details are approximate or to the best of your recollection please say so.

[Redacted Footer]

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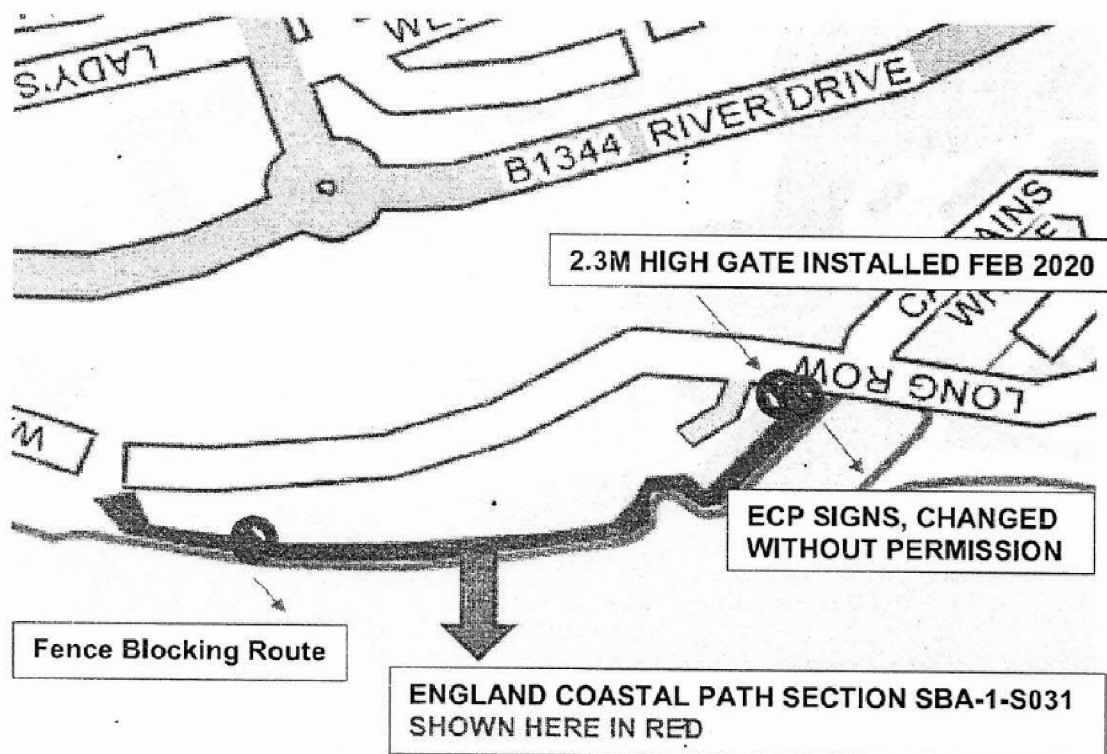
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ITEM 2 MAP OF THE ROUTE

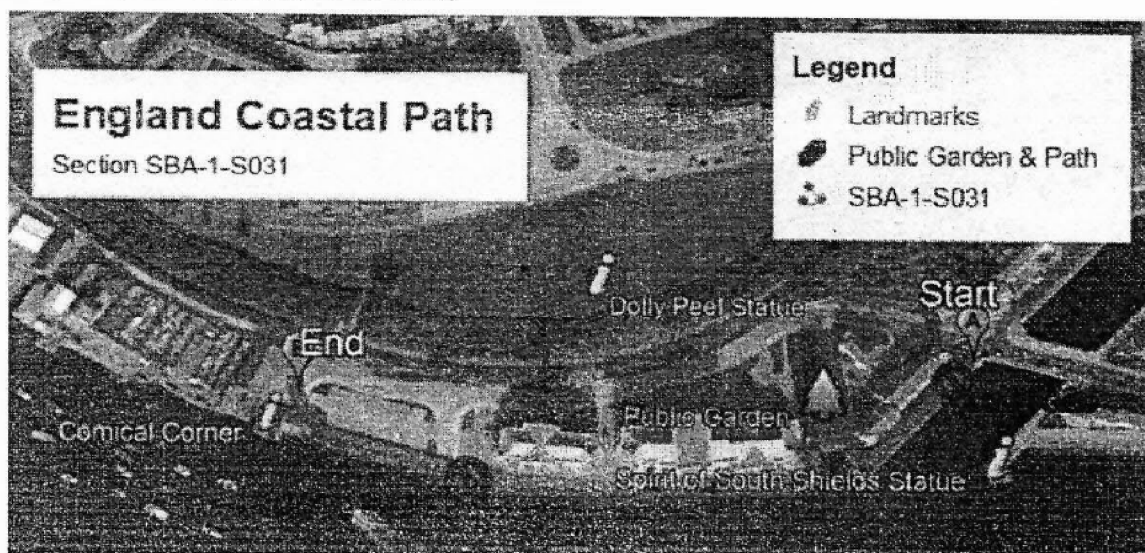
I Confirm this map is a fair and accurate reflection of the ECP Section SBA-1-S031 which I have used as referred to in my user evidence statement, and I agree to its contents.

Please feel free to annotate the map with anything that is referred to in your statement.

YOUR INITIALS: Date:



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