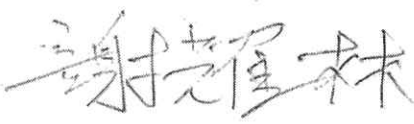



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	Date Received 收到日期	

- The representation should be made to the Town Planning Board (the Board) before the expiry of the specified plan exhibition period. The completed form and supporting documents (if any) should be sent to the Secretary, Town Planning Board, 15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong.  
申述必須於指定的圖則展期屆滿前向城市規劃委員會（下稱「委員會」）提出，填妥的表格及支持有關申述的文件（倘有），必須送交香港北角渣華道 333 號北角政府合署 15 樓城市規劃委員會秘書收。
- Please read the "Town Planning Board Guidelines on Submission and Publication of Representations, Comments on Representations and Further Representations" before you fill in this form. The Guidelines can be obtained from the Secretariat of the Board (15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong - Tel.: 2231 4810 or 2231 4835) and the Planning Enquiry Counters of the Planning Department (Hotline: 2231 5000) (17/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong and 14/F., Sha Tin Government Offices, 1 Sheung Wo Che Road, Sha Tin, New Territories), or downloaded from the Board's website at <http://www.info.gov.hk/tpb/>.  
填寫此表格之前，請先細閱有關「根據城市規劃條例提交及公佈申述、對申述的意見及進一步申述」的城市規劃委員會規劃指引。這份指引可向委員會秘書處（香港北角渣華道 333 號北角政府合署 15 樓 - 電話：2231 4810 或 2231 4835 及規劃署的規劃資料查詢處（熱線：2231 5000）（香港北角渣華道 333 號北角政府合署 17 樓及新界沙田上禾輦路 1 號沙田政府合署 14 樓）索取，亦可從委員會的網頁下載（網址：<http://www.info.gov.hk/tpb/>）。
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<b>1. Person Making this Representation (known as "Representer" hereafter)</b> 提出此宗申述的人士（下稱「申述人」）	
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)	
	
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意：若個人提交，須填上與香港身份證／護照所載的全名)	
<b>2. Authorised Agent (if applicable) 獲授權代理人(如適用)</b>	
Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation* 先生/女士/公司/機構*)	
	
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意：若個人提交，須填上與香港身份證／護照所載的全名)	
<b>3. Details of the Representation 申述詳情</b>	
Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖（請註明草圖名稱及編號）	S/K22/URA1/1 明倫街／馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0118

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.  
若申述附有支持其論點的補充資料(例如彩色及/或大尺寸的圖則、規劃研究及技術評估),則須提供 90 份複本(或 40 份印文本和 50 份電子複本)。

<sup>@</sup> Please describe the particular matter in the plan to which the representation relates. Where the representation relates to an amendment to a plan, please specify the amendment item number provided in the Schedule of Proposed Amendments.請形容圖則內與申述有關的指定事項,如申述與圖則的修訂有關,請註明在修訂項目附表內的修訂項目編號。

Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」


at the appropriate box 請在適當的方格內加上  號



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- The representation should be made to the Town Planning Board (the Board) before the expiry of the specified plan exhibition period. The completed form and supporting documents (if any) should be sent to the Secretary, Town Planning Board, 15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong.  
申述必須於指定的圖則展示期限屆滿前向城市規劃委員會(下稱「委員會」)提出, 填妥的表格及支持有關申述的文件(倘有), 必須送交香港北角渣華道333號北角政府合署15樓城市規劃委員會秘書收。
- Please read the "Town Planning Board Guidelines on Submission and Publication of Representations, Comments on Representations and Further Representations" before you fill in this form. The Guidelines can be obtained from the Secretariat of the Board (15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong - Tel.: 2231 4810 or 2231 4835) and the Planning Enquiry Counters of the Planning Department (Hotline: 2231 5000) (17/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong and 14/F., Sha Tin Government Offices, 1 Sheung Wo Che Road, Sha Tin, New Territories), or downloaded from the Board's website at <http://www.info.gov.hk/tpb/>.  
填寫此表格之前, 請先細閱有關「根據城市規劃條例提交及公佈申述、對申述的意見及進一步申述」的城市規劃委員會規劃指引。這份指引可向委員會秘書處(香港北角渣華道333號北角政府合署15樓 - 電話: 2231 4810 或 2231 4835 及規劃署的規劃資料查詢處(熱線: 2231 5000)(香港北角渣華道333號北角政府合署17樓及新界沙田上禾輦路1號沙田政府合署14樓)索取, 亦可從委員會的網頁下載(網址: <http://www.info.gov.hk/tpb/>)。
- This form can be downloaded from the Board's website, and obtained from the Secretariat of the Board and the Planning Enquiry Counters of the Planning Department. The form should be typed or completed in block letters, preferably in both English and Chinese. The representation may be treated as not having been made if the required information is not provided.  
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<b>1. Person Making this Representation (known as "Representer" hereafter)</b> 提出此宗申述的人士(下稱「申述人」)
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)  Lai Hong Lins
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

<b>2. Authorised Agent (if applicable) 獲授權代理人(如適用)</b>
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)  
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

<b>3. Details of the Representation 申述詳情</b>	
Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖(請註明草圖名稱及編號)	S/K22/URA1/1 明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0119

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	一打風落雨就不停漏水,之前漏水造改電線短路,再大問題是整個天花石屎剝落。希望盡快重建。
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	橫樑爆裂
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.  
 若申述附有支持其論點的補充資料(例如彩色及/或大尺寸的圖則、規劃研究及技術評估),則須提供 90 份複本(或 40 份印文本和 50 份電子複本)。

<sup>@</sup> Please describe the particular matter in the plan to which the representation relates. Where the representation relates to an amendment to a plan, please specify the amendment item number provided in the Schedule of Proposed Amendments. 請形容圖則內與申述有關的指定事項,如申述與圖則的修訂有關,請註明在修訂項目附表內的修訂項目編號。

Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」


at the appropriate box 請在適當的方格內加上  號



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- The representation should be made to the Town Planning Board (the Board) before the expiry of the specified plan exhibition period. The completed form and supporting documents (if any) should be sent to the Secretary, Town Planning Board, 15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong.  
申述必須於指定的圖則展示期限屆滿前向城市規劃委員會(下稱「委員會」)提出, 填妥的表格及支持有關申述的文件(倘有), 必須送交香港北角渣華道333號北角政府合署15樓城市規劃委員會秘書收。
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<b>1. Person Making this Representation (known as "Representer" hereafter)</b> 提出此宗申述的人士(下稱「申述人」)
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)  梁森之
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

<b>2. Authorised Agent (if applicable) 獲授權代理人(如適用)</b>
Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation* 先生/女士/公司/機構*)  
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

<b>3. Details of the Representation 申述詳情</b>	
Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖(請註明草圖名稱及編號)	S/K22/URA1/1 明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0120



3. Details of the Representation (Continued) (use separate sheet if necessary)<sup>#</sup>  
 申述詳情(續)(如有需要,請另頁說明)<sup>#</sup>

Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	衛生環境差
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.  
 若申述附有支持其論點的補充資料(例如彩色及/或大尺寸的圖則、規劃研究及技術評估),則須提供 90 份複本(或 40 份印文本和 50 份電子複本)。

<sup>@</sup> Please describe the particular matter in the plan to which the representation relates. Where the representation relates to an amendment to a plan, please specify the amendment item number provided in the Schedule of Proposed Amendments. 請形容圖則內與申述有關的指定事項,如申述與圖則的修訂有關,請註明在修訂項目附表內的修訂項目編號。


Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號

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	Date Received 收到日期	

- The representation should be made to the Town Planning Board (the Board) before the expiry of the specified plan exhibition period. The completed form and supporting documents (if any) should be sent to the Secretary, Town Planning Board, 15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong.  
申述必須於指定的圖則展示期限屆滿前向城市規劃委員會（下稱「委員會」）提出，填妥的表格及支持有關申述的文件（倘有），必須送交香港北角渣華道 333 號北角政府合署 15 樓城市規劃委員會秘書處。
- Please read the "Town Planning Board Guidelines on Submission and Publication of Representations, Comments on Representations and Further Representations" before you fill in this form. The Guidelines can be obtained from the Secretariat of the Board (15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong – Tel.: 2231 4810 or 2231 4835) and the Planning Enquiry Counters of the Planning Department (Hotline: 2231 5000) (17/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong and 14/F., Sha Tin Government Offices, 1 Sheung Wo Che Road, Sha Tin, New Territories), or downloaded from the Board's website at <http://www.info.gov.hk/tpb/>.  
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<b>1. Person Making this Representation (known as "Representer" hereafter) 提出此宗申述的人士（下稱「申述人」）</b>
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)  YAU YIK LING
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意：若個人提交，須填上與香港身份證／護照所載的全名)

<b>2. Authorised Agent (if applicable) 獲授權代理人(如適用)</b>
Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation* 先生/女士/公司/機構*)  
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意：若個人提交，須填上與香港身份證／護照所載的全名)

<b>3. Details of the Representation 申述詳情</b>	
Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖（請註明草圖名稱及編號）	S/K22/URA1/1 明倫街／馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0121

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
樓宇狀況 及危險	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	樓宇為舊樓,已有多年歷史,鋼筋大都生鏽,又未能乎合現今的消防條例,對居民生活造成危險,故希望儘快重建。
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.  
若申述附有支持其論點的補充資料(例如彩色及/或大尺寸的圖則、規劃研究及技術評估),則須提供 90 份複本(或 40 份印文本和 50 份電子複本)。

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Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號



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	Date Received 收到日期	

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申述必須於指定的圖則展示期限屆滿前向城市規劃委員會(下稱「委員會」)提出, 填妥的表格及支持有關申述的文件(倘有), 必須送交香港北角渣華道 333 號北角政府合署 15 樓城市規劃委員會秘書收。
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<b>1. Person Making this Representation (known as "Representer" hereafter)</b> 提出此宗申述的人士(下稱「申述人」)	
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)	
業主已過身.	
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)	
<b>2. Authorised Agent (if applicable) 獲授權代理人(如適用)</b>	
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)	
YAU YIK LING (遺產承辦人)	
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)	
<b>3. Details of the Representation 申述詳情</b>	
Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖(請註明草圖名稱及編號)	S/K22/URA1/1 明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0133

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續) (如有需要, 請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
樓宇管理 及環境 衛生.	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	興仁街的衛生環境非常差, 鼠患嚴重, 渠管爆裂及
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	滲漏等, 不時傳出惡臭, 有必要重建啊.
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話, 請註明詳情。		

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Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號



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申述必須於指定的圖則展示期限屆滿前向城市規劃委員會(下稱「委員會」)提出,填妥的表格及支持有關申述的文件(倘有),必須送交香港北角渣華道 333 號北角政府合署 15 樓城市規劃委員會秘書收。
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<b>1. Person Making this Representation (known as "Representer" hereafter)</b> 提出此宗申述的人士(下稱「申述人」)	
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)	
業主已身故	
	
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意:若個人提交,須填上與香港身份證/護照所載的全名)	

<b>2. Authorised Agent (if applicable) 獲授權代理人(如適用)</b>	
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)	
YAU YIK LING (遺產承辦人)	
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意:若個人提交,須填上與香港身份證/護照所載的全名)	

<b>3. Details of the Representation 申述詳情</b>	
Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖(請註明草圖名稱及編號)	S/K22/URA1/1 明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0145



3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
樓宇狀況	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	單位出現嚴重石屎剝落,又漏水,生活環境差,希望儘
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	快重建.
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

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Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號

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	Date Received 收到日期	

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<b>1. Person Making this Representation (known as "Representer" hereafter)</b> 提出此宗申述的人士(下稱「申述人」)	
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)	
馮潤楠 [REDACTED]	
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)	

<b>2. Authorised Agent (if applicable) 獲授權代理人(如適用)</b>	
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)	
[REDACTED]	
	
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)	

<b>3. Details of the Representation 申述詳情</b>	
Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖(請註明草圖名稱及編號)	S/K22/URA1/1 明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0122

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
樓宇樓齡高	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	快成危樓,要重建
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

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Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」


at the appropriate box 請在適當的方格內加上  號



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	Date Received 收到日期	

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<b>1. Person Making this Representation (known as "Representer" hereafter)</b> 提出此宗申述的人士(下稱「申述人」)
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)  KWOK KAM.
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

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Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)  
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

<b>3. Details of the Representation 申述詳情</b>	
Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖(請註明草圖名稱及編號)	S/K22/URA1/1 明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0123

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
樓齡高	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	需重建改善環境
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.  
若申述附有支持其論點的補充資料(例如彩色及/或大尺寸的圖則、規劃研究及技術評估),則須提供 90 份複本(或 40 份印文本和 50 份電子複本)。

<sup>@</sup> Please describe the particular matter in the plan to which the representation relates. Where the representation relates to an amendment to a plan, please specify the amendment item number provided in the Schedule of Proposed Amendments.請形容圖則內與申述有關的指定事項,如申述與圖則的修訂有關,請註明在修訂項目附表內的修訂項目編號。

Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號



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	Date Received 收到日期	

- The representation should be made to the Town Planning Board (the Board) before the expiry of the specified plan exhibition period. The completed form and supporting documents (if any) should be sent to the Secretary, Town Planning Board, 15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong.  
申述必須於指定的圖則展示期限屆滿前向城市規劃委員會（下稱「委員會」）提出，填妥的表格及支持有關申述的文件（倘有），必須送交香港北角渣華道 333 號北角政府合署 15 樓城市規劃委員會秘書收。
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**1. Person Making this Representation (known as "Representer" hereafter)**  
**提出此宗申述的人士（下稱「申述人」）**

Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)



(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
(注意：若個人提交，須填上與香港身份證／護照所載的全名)

**2. Authorised Agent (if applicable) 獲授權代理人(如適用)**

Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation\* 先生/女士/公司/機構\*)



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**3. Details of the Representation 申述詳情**

Draft plan to which the representation relates (please specify the name and number of the draft plan)  
與申述相關的草圖（請註明草圖名稱及編號）

S/K22/URA1/1  
明倫街／馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0124

**3. Details of the Representation (Continued) (use separate sheet if necessary)<sup>#</sup>**  
**申述詳情(續) (如有需要, 請另頁說明)<sup>#</sup>**

Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話, 請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.  
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<sup>@</sup> Please describe the particular matter in the plan to which the representation relates. Where the representation relates to an amendment to a plan, please specify the amendment item number provided in the Schedule of Proposed Amendments. 請形容圖則內與申述有關的指定事項, 如申述與圖則的修訂有關, 請註明在修訂項目附表內的修訂項目編號。

Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號



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申述必須於指定的圖則展示期限屆滿前向城市規劃委員會(下稱「委員會」)提出, 填妥的表格及支持有關申述的文件(倘有), 必須送交香港北角渣華道333號北角政府合署15樓城市規劃委員會秘書收。
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**1. Person Making this Representation (known as "Representer" hereafter)**  
提出此宗申述的人士(下稱「申述人」)

Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)

麥順君

(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
(注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

**2. Authorised Agent (if applicable) 獲授權代理人(如適用)**

Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation\* 先生/女士/公司/機構\*)



(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
(注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

**3. Details of the Representation 申述詳情**

Draft plan to which the representation relates (please specify the name and number of the draft plan)  
與申述相關的草圖(請註明草圖名稱及編號)

S/K22/URA1/1  
明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0125

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	漏水、鋼筋外露。 有老鼠、天花版。 批盪剝落、衛生 環境十分差。
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

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Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」


at the appropriate box 請在適當的方格內加上  號



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	Date Received 收到日期	

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申述必須於指定的圖則展示期限屆滿前向城市規劃委員會(下稱「委員會」)提出, 填妥的表格及支持有關申述的文件(倘有), 必須送交香港北角渣華道333號北角政府合署15樓城市規劃委員會秘書收。
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<b>1. Person Making this Representation (known as "Representer" hereafter)</b> 提出此宗申述的人士(下稱「申述人」)
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)
LAM MAN 
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

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Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation* 先生/女士/公司/機構*)

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<b>3. Details of the Representation 申述詳情</b>	
Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖(請註明草圖名稱及編號)	S/K22/URA1/1 明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0126

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	衛生惡差 屋內漏水
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

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Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」


at the appropriate box 請在適當的方格內加上  號



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- The representation should be made to the Town Planning Board (the Board) before the expiry of the specified plan exhibition period. The completed form and supporting documents (if any) should be sent to the Secretary, Town Planning Board, 15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong.  
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<b>1. Person Making this Representation (known as "Representer" hereafter)</b> 提出此宗申述的人士(下稱「申述人」)	
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)	
李向良 先生	
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)	

<b>2. Authorised Agent (if applicable) 獲授權代理人(如適用)</b>	
Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation* 先生/女士/公司/機構*)	
	
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)	

<b>3. Details of the Representation 申述詳情</b>	
Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖(請註明草圖名稱及編號)	S/K22/URA1/1 明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0127

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
S / K22 / URAM 明倫街 馬頭角道	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	改建後有助 <sup>旅遊</sup> 業發展, 環境得以改善,完善整體發展。 舊居民亦得到更好居住環境, 重建令居民脫離危樓發生意外風險
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.  
若申述附有支持其論點的補充資料(例如彩色及/或大尺寸的圖則、規劃研究及技術評估),則須提供 90 份複本(或 40 份印文本和 50 份電子複本)。

<sup>@</sup> Please describe the particular matter in the plan to which the representation relates. Where the representation relates to an amendment to a plan, please specify the amendment item number provided in the Schedule of Proposed Amendments. 請形容圖則內與申述有關的指定事項,如申述與圖則的修訂有關,請註明在修訂項目附表內的修訂項目編號。


Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號



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	Date Received 收到日期	

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申述必須於指定的圖則展示期限屆滿前向城市規劃委員會(下稱「委員會」)提出, 填妥的表格及支持有關申述的文件(倘有), 必須送交香港北角渣華道333號北角政府合署15樓城市規劃委員會秘書收。
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<b>1. Person Making this Representation (known as "Representer" hereafter)</b> 提出此宗申述的人士(下稱「申述人」)	
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)	
黎蘇蝦女士	
	
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)	

<b>2. Authorised Agent (if applicable) 獲授權代理人(如適用)</b>	
Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation* 先生/女士/公司/機構*)	
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)	

<b>3. Details of the Representation 申述詳情</b>	
Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖(請註明草圖名稱及編號)	S/K22/URA1/1 明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0128



3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
S/K22/URAI/1 明倫街 馬頭角道	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	及早脫離老化危樓
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.  
若申述附有支持其論點的補充資料(例如彩色及/或大尺寸的圖則、規劃研究及技術評估),則須提供 90 份複本(或 40 份印文本和 50 份電子複本)。


<sup>@</sup> Please describe the particular matter in the plan to which the representation relates. Where the representation relates to an amendment to a plan, please specify the amendment item number provided in the Schedule of Proposed Amendments. 請形容圖則內與申述有關的指定事項,如申述與圖則的修訂有關,請註明在修訂項目附表內的修訂項目編號。

Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號

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	Date Received 收到日期	

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申述必須於指定的圖則展示期限屆滿前向城市規劃委員會(下稱「委員會」)提出, 填寫的表格及支持有關申述的文件(倘有), 必須送交香港北角渣華道 333 號北角政府合署 15 樓城市規劃委員會秘書收。
- Please read the "Town Planning Board Guidelines on Submission and Publication of Representations, Comments on Representations and Further Representations" before you fill in this form. The Guidelines can be obtained from the Secretariat of the Board (15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong - Tel.: 2231 4810 or 2231 4835) and the Planning Enquiry Counters of the Planning Department (Hotline: 2231 5000) (17/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong and 14/F., Sha Tin Government Offices, 1 Sheung Wo Che Road, Sha Tin, New Territories), or downloaded from the Board's website at <http://www.info.gov.hk/tpb/>.  
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<b>1. Person Making this Representation (known as "Representer" hereafter)</b> 提出此宗申述的人士(下稱「申述人」)	
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)  鄒浩	
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)	

<b>2. Authorised Agent (if applicable) 獲授權代理人(如適用)</b>	
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)	
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)	

<b>3. Details of the Representation 申述詳情</b>	
Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖(請註明草圖名稱及編號)	S/K22/URA1/1 明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0129

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	屋破漏
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.  
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Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號



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	Date Received 收到日期	

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申述必須於指定的圖則展示期限屆滿前向城市規劃委員會(下稱「委員會」)提出, 填妥的表格及支持有關申述的文件(倘有), 必須送交香港北角渣華道 333 號北角政府合署 15 樓城市規劃委員會秘書收。
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<b>1. Person Making this Representation (known as "Representer" hereafter)</b> 提出此宗申述的人士(下稱「申述人」)	
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)  李杰	
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)	

<b>2. Authorised Agent (if applicable) 獲授權代理人(如適用)</b>	
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)	
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Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖(請註明草圖名稱及編號)	S/K22/URA1/1 明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0130

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	快重建
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.  
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Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號



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申述必須於指定的圖則展示期限屆滿前向城市規劃委員會(下稱「委員會」)提出, 填妥的表格及支持有關申述的文件(倘有), 必須送交香港北角渣華道 333 號北角政府合署 15 樓城市規劃委員會秘書收。
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<b>1. Person Making this Representation (known as "Representer" hereafter)</b> 提出此宗申述的人士 (下稱「申述人」)	
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)	
<p style="text-align: center;">陳志強</p>	
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)	

<b>2. Authorised Agent (if applicable) 獲授權代理人(如適用)</b>	
Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation* 先生/女士/公司/機構*)	
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)	

<b>3. Details of the Representation 申述詳情</b>	
Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖 (請註明草圖名稱及編號)	S/K22/URA1/1 明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0131



3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續) (如有需要, 請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	漏水 尿石尿
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話, 請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.  
若申述附有支持其論點的補充資料(例如彩色及/或大尺寸的圖則、規劃研究及技術評估), 則須提供 90 份複本(或 40 份印文本和 50 份電子複本)。

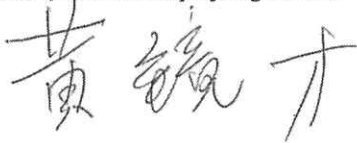

<sup>@</sup> Please describe the particular matter in the plan to which the representation relates. Where the representation relates to an amendment to a plan, please specify the amendment item number provided in the Schedule of Proposed Amendments. 請形容圖則內與申述有關的指定事項, 如申述與圖則的修訂有關, 請註明在修訂項目附表內的修訂項目編號。

Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號

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	Date Received 收到日期	

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<b>1. Person Making this Representation (known as "Representer" hereafter)</b> 提出此宗申述的人士 (下稱「申述人」)	
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)	
	
	
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)	

<b>2. Authorised Agent (if applicable) 獲授權代理人(如適用)</b>	
Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation* 先生/女士/公司/機構*)	
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<b>3. Details of the Representation 申述詳情</b>	
Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖 (請註明草圖名稱及編號)	S/K22/URA1/1 明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0132

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	廚房漏水
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.  
若申述附有支持其論點的補充資料(例如彩色及/或大尺寸的圖則、規劃研究及技術評估),則須提供 90 份複本(或 40 份印文本和 50 份電子複本)。

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Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號



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	Date Received 收到日期	

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**1. Person Making this Representation (known as "Representer" hereafter)**  
提出此宗申述的人士(下稱「申述人」)

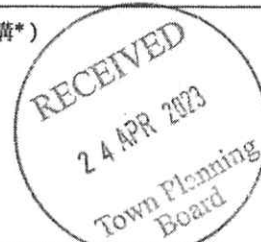
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)

Sam Yau Lung

(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
(注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

**2. Authorised Agent (if applicable) 獲授權代理人(如適用)**

Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation\* 先生/女士/公司/機構\*)



(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
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**3. Details of the Representation 申述詳情**

Draft plan to which the representation relates (please specify the name and number of the draft plan)  
與申述相關的草圖(請註明草圖名稱及編號)

S/K22/URA1/1  
明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0134

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	尾房漏水 前窗戶又漏水 鋼底外 露
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

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Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號



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	Date Received 收到日期	

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提出此宗申述的人士(下稱「申述人」)

Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)

(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
(注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

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Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)



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Draft plan to which the representation relates (please specify the name and number of the draft plan)  
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S/K22/URA1/1  
明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」



3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	漏水 鋼筋外露
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	天井裝氣 池 天
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	蚊 害 嚴重
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.  
若申述附有支持其論點的補充資料(例如彩色及/或大尺寸的圖則、規劃研究及技術評估),則須提供 90 份複本(或 40 份印文本和 50 份電子複本)。



<sup>@</sup> Please describe the particular matter in the plan to which the representation relates. Where the representation relates to an amendment to a plan, please specify the amendment item number provided in the Schedule of Proposed Amendments. 請形容圖則內與申述有關的指定事項,如申述與圖則的修訂有關,請註明在修訂項目附表內的修訂項目編號。

Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號

For Official Use Only 請勿填寫此欄	Reference No. 檔案編號	TPB/R/S/K22/URA1/1- <b>118</b>
	Date Received 收到日期	

- The representation should be made to the Town Planning Board (the Board) before the expiry of the specified plan exhibition period. The completed form and supporting documents (if any) should be sent to the Secretary, Town Planning Board, 15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong.  
申述必須於指定的圖則展示期限屆滿前向城市規劃委員會(下稱「委員會」)提出, 填妥的表格及支持有關申述的文件(倘有), 必須送交香港北角渣華道 333 號北角政府合署 15 樓城市規劃委員會秘書處。
- Please read the "Town Planning Board Guidelines on Submission and Publication of Representations, Comments on Representations and Further Representations" before you fill in this form. The Guidelines can be obtained from the Secretariat of the Board (15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong - Tel.: 2231 4810 or 2231 4835) and the Planning Enquiry Counters of the Planning Department (Hotline: 2231 5000) (17/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong and 14/F., Sha Tin Government Offices, 1 Sheung Wo Che Road, Sha Tin, New Territories), or downloaded from the Board's website at <http://www.info.gov.hk/tpb/>.  
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<b>1. Person Making this Representation (known as "Representer" hereafter)</b> 提出此宗申述的人士(下稱「申述人」)	
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)	
	
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)	
<b>2. Authorised Agent (if applicable) 獲授權代理人(如適用)</b>	
Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation* 先生/女士/公司/機構*)	
	
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)	
<b>3. Details of the Representation 申述詳情</b>	
Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖(請註明草圖名稱及編號)	S/K22/URA1/1 明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0136

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續) (如有需要, 請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	滿水
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	牆身裂開 鋼筋外露
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話, 請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.  
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<sup>@</sup> Please describe the particular matter in the plan to which the representation relates. Where the representation relates to an amendment to a plan, please specify the amendment item number provided in the Schedule of Proposed Amendments. 請形容圖則內與申述有關的指定事項, 如申述與圖則的修訂有關, 請註明在修訂項目附表內的修訂項目編號。

Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號





3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	屋宇漏水
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

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Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號



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	Date Received 收到日期	

- The representation should be made to the Town Planning Board (the Board) before the expiry of the specified plan exhibition period. The completed form and supporting documents (if any) should be sent to the Secretary, Town Planning Board, 15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong.  
申述必須於指定的圖則展期屆滿前向城市規劃委員會（下稱「委員會」）提出，填妥的表格及支持有關申述的文件（倘有），必須送交香港北角渣華道 333 號北角政府合署 15 樓城市規劃委員會秘書收。
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<b>1. Person Making this Representation (known as "Representer" hereafter)</b> 提出此宗申述的人士（下稱「申述人」）	
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)	
黎智鴻	
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意：若個人提交，須填上與香港身份證／護照所載的全名)	
<b>2. Authorised Agent (if applicable) 獲授權代理人(如適用)</b>	
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)	
	
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<b>3. Details of the Representation 申述詳情</b>	
Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖（請註明草圖名稱及編號）	S/K22/URA1/1 明倫街／馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0138



3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	由該單位討論, 屋內鋼筋大都生鏽, 加以牆身裂開, 打風落雨就出現滲水
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話, 請註明詳情。		

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Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號

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	Date Received 收到日期	

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<b>1. Person Making this Representation (known as "Representer" hereafter)</b> 提出此宗申述的人士(下稱「申述人」)
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)  黎嘉寶 215 方口寶
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

<b>2. Authorised Agent (if applicable) 獲授權代理人(如適用)</b>
Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation* 先生/女士/公司/機構*)  
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<b>3. Details of the Representation 申述詳情</b>	
Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖(請註明草圖名稱及編號)	S/K22/URA1/1 明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0139

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	① 屋內鋼筋 ② 牆身裂開 ③ 漏水 ④ 批盪剝落
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.  
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Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號



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	Date Received 收到日期	

- The representation should be made to the Town Planning Board (the Board) before the expiry of the specified plan exhibition period. The completed form and supporting documents (if any) should be sent to the Secretary, Town Planning Board, 15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong.  
申述必須於指定的圖則展示期限屆滿前向城市規劃委員會（下稱「委員會」）提出，填妥的表格及支持有關申述的文件（倘有），必須送交香港北角渣華道 333 號北角政府合署 15 樓城市規劃委員會秘書收。
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填寫此表格之前，請先細閱有關「根據城市規劃條例提交及公佈申述、對申述的意見及進一步申述」的城市規劃委員會規劃指引。這份指引可向委員會秘書處（香港北角渣華道 333 號北角政府合署 15 樓 - 電話：2231 4810 或 2231 4835 及規劃署的規劃資料查詢處（熱線：2231 5000）（香港北角渣華道 333 號北角政府合署 17 樓及新界沙田上禾輦路 1 號沙田政府合署 14 樓）索取，亦可從委員會的網頁下載（網址：<http://www.info.gov.hk/tpb/>）。
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<b>1. Person Making this Representation (known as "Representer" hereafter)</b> 提出此宗申述的人士（下稱「申述人」）	
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)	
	
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意：若個人提交，須填上與香港身份證／護照所載的全名)	
<b>2. Authorised Agent (if applicable) 獲授權代理人(如適用)</b>	
Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation* 先生/女士/公司/機構*)	
	
	
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意：若個人提交，須填上與香港身份證／護照所載的全名)	
<b>3. Details of the Representation 申述詳情</b>	
Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖（請註明草圖名稱及編號）	S/K22/URA1/1 明倫街／馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0140

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
重建五街.	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	改善環境 樓宇太舊 危樓 日舊失修 修無可修
優化海濱	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	可連接啟德發展. 居民可以有沿海步行
重建新寶工業中心	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	可以進一步發展 可以改善附近環境
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.

若申述附有支持其論點的補充資料(例如彩色及/或大尺寸的圖則、規劃研究及技術評估),則須提供 90 份複本(或 40 份印文本和 50 份電子複本)。

<sup>@</sup> Please describe the particular matter in the plan to which the representation relates. Where the representation relates to an amendment to a plan, please specify the amendment item number provided in the Schedule of Proposed Amendments. 請形容圖則內與申述有關的指定事項,如申述與圖則的修訂有關,請註明在修訂項目附表內的修訂項目編號。

Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」


at the appropriate box 請在適當的方格內加上  號



For Official Use Only 請勿填寫此欄	Reference No. 檔案編號	TPB/R/S/K22/URA1/1- <b>123</b>
	Date Received 收到日期	

- The representation should be made to the Town Planning Board (the Board) before the expiry of the specified plan exhibition period. The completed form and supporting documents (if any) should be sent to the Secretary, Town Planning Board, 15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong.  
申述必須於指定的圖則展示期限屆滿前向城市規劃委員會(下稱「委員會」)提出, 填妥的表格及支持有關申述的文件(倘有), 必須送交香港北角渣華道 333 號北角政府合署 15 樓城市規劃委員會秘書收。
- Please read the "Town Planning Board Guidelines on Submission and Publication of Representations, Comments on Representations and Further Representations" before you fill in this form. The Guidelines can be obtained from the Secretariat of the Board (15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong - Tel.: 2231 4810 or 2231 4835) and the Planning Enquiry Counters of the Planning Department (Hotline: 2231 5000) (17/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong and 14/F., Sha Tin Government Offices, 1 Sheung Wo Che Road, Sha Tin, New Territories), or downloaded from the Board's website at <http://www.info.gov.hk/tpb/>.  
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- This form can be downloaded from the Board's website, and obtained from the Secretariat of the Board and the Planning Enquiry Counters of the Planning Department. The form should be typed or completed in block letters, preferably in both English and Chinese. The representation may be treated as not having been made if the required information is not provided.  
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<b>1. Person Making this Representation (known as "Representer" hereafter)</b> 提出此宗申述的人士(下稱「申述人」)
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)  李柏儀
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

<b>2. Authorised Agent (if applicable) 獲授權代理人(如適用)</b>
Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation* 先生/女士/公司/機構*)  
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

RECEIVED

24 APR 2023

Town Planning Board

<b>3. Details of the Representation 申述詳情</b>	
Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖(請註明草圖名稱及編號)	S/K22/URA1/1 明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0141



3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
重建五街	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	改善民生 樓宇危險 多座大廈有千斤頂,但成效不大
重建五街	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	四圍環境要劣 多老人及低收入人士
改善交通	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	經常塞車 因車路太窄
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.  
若申述附有支持其論點的補充資料(例如彩色及/或大尺寸的圖則、規劃研究及技術評估),則須提供 90 份複本(或 40 份印文本和 50 份電子複本)。


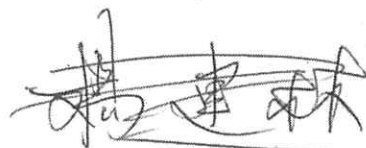

<sup>@</sup> Please describe the particular matter in the plan to which the representation relates. Where the representation relates to an amendment to a plan, please specify the amendment item number provided in the Schedule of Proposed Amendments. 請形容圖則內與申述有關的指定事項,如申述與圖則的修訂有關,請註明在修訂項目附表內的修訂項目編號。

Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號

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	Date Received 收到日期	

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申述必須於指定的圖則展期屆滿前向城市規劃委員會(下稱「委員會」)提出, 填妥的表格及支持有關申述的文件(倘有), 必須送交香港北角渣華道 333 號北角政府合署 15 樓城市規劃委員會秘書收。
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<b>1. Person Making this Representation (known as "Representer" hereafter)</b> 提出此宗申述的人士(下稱「申述人」)	
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)	
	
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)	
<b>2. Authorised Agent (if applicable) 獲授權代理人(如適用)</b>	
Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation* 先生/女士/公司/機構*)	
	
	
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)	
<b>3. Details of the Representation 申述詳情</b>	
Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖(請註明草圖名稱及編號)	S/K22/URA1/1 明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0142

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.

若申述附有支持其論點的補充資料(例如彩色及/或大尺寸的圖則、規劃研究及技術評估),則須提供 90 份複本(或 40 份印文本和 50 份電子複本)。

<sup>@</sup> Please describe the particular matter in the plan to which the representation relates. Where the representation relates to an amendment to a plan, please specify the amendment item number provided in the Schedule of Proposed Amendments.請形容圖則內與申述有關的指定事項,如申述與圖則的修訂有關,請註明在修訂項目附表內的修訂項目編號。

Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號



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	Date Received 收到日期	

- The representation should be made to the Town Planning Board (the Board) before the expiry of the specified plan exhibition period. The completed form and supporting documents (if any) should be sent to the Secretary, Town Planning Board, 15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong.  
申述必須於指定的圖則展示期限屆滿前向城市規劃委員會（下稱「委員會」）提出，填寫的表格及支持有關申述的文件（倘有），必須送交香港北角渣華道 333 號北角政府合署 15 樓城市規劃委員會秘書收。
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**1. Person Making this Representation (known as "Representer" hereafter)**  
**提出此宗申述的人士（下稱「申述人」）**

Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)

林長煥

任荷蘭

(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
(注意：若個人提交，須填上與香港身份證／護照所載的全名)

**2. Authorised Agent (if applicable) 獲授權代理人(如適用)**

Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation\* 先生/女士/公司/機構\*)



(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
(注意：若個人提交，須填上與香港身份證／護照所載的全名)

**3. Details of the Representation 申述詳情**

Draft plan to which the representation relates (please specify the name and number of the draft plan)  
與申述相關的草圖（請註明草圖名稱及編號）

S/K22/URA1/1  
明倫街／馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0143

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	漏水
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是是否有任何擬議修訂? 如有的話,請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.  
若申述附有支持其論點的補充資料(例如彩色及/或大尺寸的圖則、規劃研究及技術評估),則須提供 90 份複本(或 40 份印文本和 50 份電子複本)。


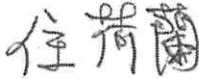
<sup>@</sup> Please describe the particular matter in the plan to which the representation relates. Where the representation relates to an amendment to a plan, please specify the amendment item number provided in the Schedule of Proposed Amendments.請形容圖則內與申述有關的指定事項,如申述與圖則的修訂有關,請註明在修訂項目附表內的修訂項目編號。


Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號

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	Date Received 收到日期	

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申述必須於指定的圖則展示期限屆滿前向城市規劃委員會(下稱「委員會」)提出,填妥的表格及支持有關申述的文件(倘有),必須送交香港北角渣華道 333 號北角政府合署 15 樓城市規劃委員會秘書收。
- Please read the "Town Planning Board Guidelines on Submission and Publication of Representations, Comments on Representations and Further Representations" before you fill in this form. The Guidelines can be obtained from the Secretariat of the Board (15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong - Tel.: 2231 4810 or 2231 4835) and the Planning Enquiry Counters of the Planning Department (Hotline: 2231 5000) (17/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong and 14/F., Sha Tin Government Offices, 1 Sheung Wo Che Road, Sha Tin, New Territories), or downloaded from the Board's website at <http://www.info.gov.hk/tpb/>.  
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<b>1. Person Making this Representation (known as "Representer" hereafter)</b> 提出此宗申述的人士(下稱「申述人」)	
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)	
 	
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交,須填上與香港身份證/護照所載的全名)	

<b>2. Authorised Agent (if applicable) 獲授權代理人(如適用)</b>	
Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation* 先生/女士/公司/機構*)	
	
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<b>3. Details of the Representation 申述詳情</b>	
Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖(請註明草圖名稱及編號)	S/K22/URA1/1 明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0144



3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	漏水
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.

若申述附有支持其論點的補充資料(例如彩色及/或大尺寸的圖則、規劃研究及技術評估),則須提供 90 份複本(或 40 份印文本和 50 份電子複本)。

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Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號

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	Date Received 收到日期	

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### 1. Person Making this Representation (known as "Representer" hereafter) 提出此宗申述的人士 (下稱「申述人」)

Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)

文曉琳

(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
(注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

### 2. Authorised Agent (if applicable) 獲授權代理人(如適用)

Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)



(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
(注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

### 3. Details of the Representation 申述詳情

Draft plan to which the representation relates (please specify the name and number of the draft plan)  
與申述相關的草圖 (請註明草圖名稱及編號)

S/K22/URA1/1  
明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0146

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	漏水, 石屎剝落
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話, 請註明詳情。		

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Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號



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	Date Received 收到日期	

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<b>1. Person Making this Representation (known as "Representer" hereafter)</b> 提出此宗申述的人士(下稱「申述人」)	
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)	
何嘉琪	
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)	
<b>2. Authorised Agent (if applicable) 獲授權代理人(如適用)</b>	
Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation* 先生/女士/公司/機構*)	
	
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Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖(請註明草圖名稱及編號)	S/K22/URA1/1 明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0147

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	經常見到死老鼠
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	滴水
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

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Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號



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<b>1. Person Making this Representation (known as "Representer" hereafter)</b> 提出此宗申述的人士 (下稱「申述人」)	
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)	
吳詠儀	
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)	
<b>2. Authorised Agent (if applicable) 獲授權代理人(如適用)</b>	
Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation* 先生/女士/公司/機構*)	
	
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<b>3. Details of the Representation 申述詳情</b>	
Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖 (請註明草圖名稱及編號)	S/K22/URA1/1 明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0148



3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	單位對海,屋內的鋼筋大部生鏽,加上牆身裂開,每逢下雨及颱風季節,牆身出現漏水,需要用毛巾桶接水 漏水
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	環境衛生惡劣,老鼠四處出沒,街道堆滿垃圾 每晚回家,見到老鼠一起上檯搽,非常擔心,
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	環境非常差,天井長期有垃圾堆積,渠管爆裂及滲漏,不時傳出惡臭
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.  
若申述附有支持其論點的補充資料(例如彩色及/或大尺寸的圖則、規劃研究及技術評估),則須提供 90 份複本(或 40 份印文本和 50 份電子複本)。

<sup>@</sup> Please describe the particular matter in the plan to which the representation relates. Where the representation relates to an amendment to a plan, please specify the amendment item number provided in the Schedule of Proposed Amendments. 請形容圖則內與申述有關的指定事項,如申述與圖則的修訂有關,請註明在修訂項目附表內的修訂項目編號。

Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號

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	Date Received 收到日期	

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申述必須於指定的圖則展示期限屆滿前向城市規劃委員會(下稱「委員會」)提出, 填妥的表格及支持有關申述的文件(倘有), 必須送交香港北角渣華道 333 號北角政府合署 15 樓城市規劃委員會秘書收。
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**1. Person Making this Representation (known as "Representer" hereafter)**  
提出此宗申述的人士(下稱「申述人」)

Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)

葉福騰

(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
(注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

**2. Authorised Agent (if applicable) 獲授權代理人(如適用)**

Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)



(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
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**3. Details of the Representation 申述詳情**

Draft plan to which the representation relates (please specify the name and number of the draft plan)  
與申述相關的草圖(請註明草圖名稱及編號)

S/K22/JRA1/1  
明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0149

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.  
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<sup>@</sup> Please describe the particular matter in the plan to which the representation relates. Where the representation relates to an amendment to a plan, please specify the amendment item number provided in the Schedule of Proposed Amendments. 請形容圖則內與申述有關的指定事項,如申述與圖則的修訂有關,請註明在修訂項目附表內的修訂項目編號。

Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號



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<b>1. Person Making this Representation (known as "Representer" hereafter)</b> 提出此宗申述的人士 (下稱「申述人」)	
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)	
趙建國	
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)	
<b>2. Authorised Agent (if applicable) 獲授權代理人(如適用)</b>	
Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation* 先生/女士/公司/機構*)	
	
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)	
<b>3. Details of the Representation 申述詳情</b>	
Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖 (請註明草圖名稱及編號)	S/K22/URA1/1 明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0150

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>ⓐ</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	環境差流水
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

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Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號



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提出此宗申述的人士(下稱「申述人」)

Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)

陳慧卿

(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
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S/K22/URA1/1  
明倫街/馬頭角道

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0151



3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	衛生環境差
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

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**1. Person Making this Representation (known as "Representer" hereafter)**  
提出此宗申述的人士(下稱「申述人」)

Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)

方雅琪

(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
(注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

**2. Authorised Agent (if applicable) 獲授權代理人(如適用)**

Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation\* 先生/女士/公司/機構\*)



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**3. Details of the Representation 申述詳情**

Draft plan to which the representation relates (please specify the name and number of the draft plan)  
與申述相關的草圖(請註明草圖名稱及編號)

S/K22/URA1/1  
明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0152

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	屋內有漏水
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

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Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號



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	Date Received 收到日期	

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Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)	
	
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)	
<b>2. Authorised Agent (if applicable) 獲授權代理人(如適用)</b>	
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)	
	
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<b>3. Details of the Representation 申述詳情</b>	
Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖(請註明草圖名稱及編號)	S/K22/URA1/1 明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0153

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	漏水
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

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Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號



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提出此宗申述的人士 (下稱「申述人」)

Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)

黃可寬

(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
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Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)



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**3. Details of the Representation 申述詳情**

Draft plan to which the representation relates (please specify the name and number of the draft plan)  
與申述相關的草圖 (請註明草圖名稱及編號)

S/K22/URA1/1  
明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
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0154



3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	漏水。
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.  
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Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號

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Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)

陳振華

(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
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S/K22/URA1/1  
明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
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0155

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	內牆破爛
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

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- The representation should be made to the Town Planning Board (the Board) before the expiry of the specified plan exhibition period. The completed form and supporting documents (if any) should be sent to the Secretary, Town Planning Board, 15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong.  
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- Please read the "Town Planning Board Guidelines on Submission and Publication of Representations, Comments on Representations and Further Representations" before you fill in this form. The Guidelines can be obtained from the Secretariat of the Board (15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong - Tel.: 2231 4810 or 2231 4835) and the Planning Enquiry Counters of the Planning Department (Hotline: 2231 5000) (17/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong and 14/F., Sha Tin Government Offices, 1 Sheung Wo Che Road, Sha Tin, New Territories), or downloaded from the Board's website at <http://www.info.gov.hk/tpb/>.  
填寫此表格之前，請先細閱有關「根據城市規劃條例提交及公佈申述、對申述的意見及進一步申述」的城市規劃委員會規劃指引。這份指引可向委員會秘書處（香港北角渣華道 333 號北角政府合署 15 樓 - 電話：2231 4810 或 2231 4835 及規劃署的規劃資料查詢處（熱線：2231 5000）（香港北角渣華道 333 號北角政府合署 17 樓及新界沙田上禾輦路 1 號沙田政府合署 14 樓）索取，亦可從委員會的網頁下載（網址：<http://www.info.gov.hk/tpb/>）。
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此表格可從委員會的網頁下載，亦可向委員會秘書處及規劃署的規劃資料查詢處索取。提出申述的人士須以打印方式或以正楷填寫表格，填寫的資料宜中英文兼備。倘若未能提供所需資料，則委員會可把有關申述視為不曾提出論。

**1. Person Making this Representation (known as "Representer" hereafter)**  
提出此宗申述的人士（下稱「申述人」）

Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)

鄧志麟

(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
(注意：若個人提交，須填上與香港身份證／護照所載的全名)

**2. Authorised Agent (if applicable) 獲授權代理人(如適用)**

Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation\* 先生/女士/公司/機構\*)



(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
(注意：若個人提交，須填上與香港身份證／護照所載的全名)

**3. Details of the Representation 申述詳情**

Draft plan to which the representation relates (please specify the name and number of the draft plan)  
與申述相關的草圖（請註明草圖名稱及編號）

S/K22/URA1/1  
明倫街／馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0156

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	樓宇已快修,業主年紀老化,土瓜灣多氣仍在蒸氣,必須更新
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	反對人仕可考慮合資買入5街單位自行處理
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		
沒有		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.  
若申述附有支持其論點的補充資料(例如彩色及/或大尺寸的圖則、規劃研究及技術評估),則須提供 90 份複本(或 40 份印文本和 50 份電子複本)。

<sup>@</sup> Please describe the particular matter in the plan to which the representation relates. Where the representation relates to an amendment to a plan, please specify the amendment item number provided in the Schedule of Proposed Amendments. 請形容圖則內與申述有關的指定事項,如申述與圖則的修訂有關,請註明在修訂項目附表內的修訂項目編號。

Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」


at the appropriate box 請在適當的方格內加上  號



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申述必須於指定的圖則展示期限屆滿前向城市規劃委員會(下稱「委員會」)提出, 填妥的表格及支持有關申述的文件(倘有), 必須送交香港北角渣華道 333 號北角政府合署 15 樓城市規劃委員會秘書收。
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<b>1. Person Making this Representation (known as "Representer" hereafter)</b> 提出此宗申述的人士 (下稱「申述人」)
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)  鍾惠芳  (Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

<b>2. Authorised Agent (if applicable) 獲授權代理人(如適用)</b>
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)    (Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

<b>3. Details of the Representation 申述詳情</b>	
Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖 (請註明草圖名稱及編號)	S/K22/URA1/1 明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0157



3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	漏水 老鼠
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.  
若申述附有支持其論點的補充資料(例如彩色及/或大尺寸的圖則、規劃研究及技術評估),則須提供 90 份複本(或 40 份印文本和 50 份電子複本)。

<sup>@</sup> Please describe the particular matter in the plan to which the representation relates. Where the representation relates to an amendment to a plan, please specify the amendment item number provided in the Schedule of Proposed Amendments. 請形容圖則內與申述有關的指定事項,如申述與圖則的修訂有關,請註明在修訂項目附表內的修訂項目編號。

Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號

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	Date Received 收到日期	

- The representation should be made to the Town Planning Board (the Board) before the expiry of the specified plan exhibition period. The completed form and supporting documents (if any) should be sent to the Secretary, Town Planning Board, 15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong.  
申述必須於指定的圖則展示期限屆滿前向城市規劃委員會(下稱「委員會」)提出, 填妥的表格及支持有關申述的文件(倘有), 必須送交香港北角渣華道 333 號北角政府合署 15 樓城市規劃委員會秘書收。
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**1. Person Making this Representation (known as "Representer" hereafter)**  
提出此宗申述的人士(下稱「申述人」)

Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)



(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
(注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

**2. Authorised Agent (if applicable) 獲授權代理人(如適用)**

Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation\* 先生/女士/公司/機構\*)



(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
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**3. Details of the Representation 申述詳情**

Draft plan to which the representation relates (please specify the name and number of the draft plan)  
與申述相關的草圖(請註明草圖名稱及編號)

S/K22/URA1/1  
明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0158

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	本人單位天花嚴重 漏水石屎剝落並 鋼筋外露非常擔心 人身安全. 懇請盡快
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	處理此區重建能 盡快搬離此單位. 謝謝.
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話, 請註明詳情.		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.  
 若申述附有支持其論點的補充資料(例如彩色及/或大尺寸的圖則、規劃研究及技術評估), 則須提供 90 份複本(或 40 份印文本和 50 份電子複本)。

<sup>@</sup> Please describe the particular matter in the plan to which the representation relates. Where the representation relates to an amendment to a plan, please specify the amendment item number provided in the Schedule of Proposed Amendments. 請形容圖則內與申述有關的指定事項, 如申述與圖則的修訂有關, 請註明在修訂項目附表內的修訂項目編號。

Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號



(This part will not be made available for public inspection)  
(這部份不會公開予公眾查閱)

Particulars of "Representer" and Authorised Agent  
「申述人」及獲授權代理人的詳細資料

Important Notice 重要告示

1. 申述人須填上香港身份證/護照所載的全名
2. 申述人亦須提供香港身份證/護照號碼的首四個字母數字字符(例子: C668/CC66)
3. 獲授權代理人(如適用)的代表亦須提供香港身份證/護照所載的全名及號碼的首四個字母數字字符(例子: C668/CC66)
4. 如申述由獲授權代理人提交, 代理人須提交申述人簽署的委任文書正本
5. 申述人或其獲授權代理人請提供郵寄地址或電郵地址以便書信通訊
6. 申述人須詳閱關於「根據《城市規劃條例》提交及公布申述、對申述的意見及進一步申述」的城市規劃委員會(下稱「委員會」)規劃指引編號 29B

申述若沒有提供上述第 1 至 3 項的資料, 則該申述會視為不曾作出。若沒有提供上述第 4 項的資料, 則該申述將視為並沒有委任獲授權代理人。沒有提供上述第 5 項資料(註: 不完整或無法辨識的通訊地址亦視作沒有提供)的申述人將視作無意收到往後相關函件及出席聆聽會議。委員會秘書處保留權利要求申述人提供身份證明以作核實。若有需要, 申述人可透過委員會網站取得聆聽會議安排、相關文件等資料, 並聯絡委員會秘書處, 以安排出席聆聽會議。

1. Representer must provide the full name shown on Hong Kong Identity (HKID) Card/Passport
2. Representer must provide the first four alphanumeric characters of HKID Card/Passport number (e.g. C668/CC66)
3. The representative of the authorised agent (if applicable) must also provide his/her full name shown on HKID Card/Passport and the first four alphanumeric characters of his/her HKID Card/Passport number (e.g. C668/CC66)
4. For submission made by authorised agent on the representer's behalf, the original signed authorisation letter should be provided
5. Representer or his/her authorised agent is requested to provide postal address or email address to facilitate communication in writing
6. Representer is advised to read the Town Planning Board (the Board) Guidelines No. 29B on "Submission and Publication of Representations, Comments on Representations and Further Representations under the Town Planning Ordinance" (TPB PG-No. 29B).

If representer fails to provide the information of items 1 to 3 above, the representation submitted **shall be treated as not having been made**. Failure to provide the document of item 4 above shall be taken as that no authorisation agent is appointed for the representation. Failure to provide information of item 5 above (note: incomplete or illegible correspondence may also be treated as not having been provided) will be taken to indicate that the representer is not willing to receive further correspondences and attend the hearing. The Secretariat of the Board reserves the right to require the representer to provide identity proof for verification. If needed, the representer may check the information regarding the hearing arrangement, relevant papers, etc. on the Board's website, and contact the Secretariat of the Board to make arrangement for their attendance at the hearing.

1. Representer 「申述人」

Full Name of Representer's Representative (Only applicable to organisation/group as a representer)  
申述人代表全名(只適用於申述人為機構組織)

HU YIM LING

(Note: full name shown on HKID Card/Passport must be provided)  
(註: 須提供香港身份證/護照所載的全名)

- # Necessary information. If representer is an organisation/group, must provide the information of the representative  
必須資料。如果申述人為機構組織, 須提供其代表的資料
- @ Please refer to point no. 5 of Important Notice  
請查閱重要告示的第 5 點

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	Date Received 收到日期	

- The representation should be made to the Town Planning Board (the Board) before the expiry of the specified plan exhibition period. The completed form and supporting documents (if any) should be sent to the Secretary, Town Planning Board, 15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong.  
申述必須於指定的圖則展示期限屆滿前向城市規劃委員會(下稱「委員會」)提出, 填妥的表格及支持有關申述的文件(倘有), 必須送交香港北角渣華道 333 號北角政府合署 15 樓城市規劃委員會秘書收。
- Please read the "Town Planning Board Guidelines on Submission and Publication of Representations, Comments on Representations and Further Representations" before you fill in this form. The Guidelines can be obtained from the Secretariat of the Board (15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong - Tel.: 2231 4810 or 2231 4835) and the Planning Enquiry Counters of the Planning Department (Hotline: 2231 5000) (17/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong and 14/F., Sha Tin Government Offices, 1 Sheung Wo Che Road, Sha Tin, New Territories), or downloaded from the Board's website at <http://www.info.gov.hk/tpb/>.  
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此表格可從委員會的網頁下載, 亦可向委員會秘書處及規劃署的規劃資料查詢處索取。提出申述的人士須以打印方式或以正楷填寫表格, 填寫的資料宜中英文兼備。倘若未能提供所需資料, 則委員會可把有關申述視為不曾提出論。

<b>1. Person Making this Representation (known as "Representer" hereafter)</b> 提出此宗申述的人士(下稱「申述人」)	
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)  <p style="text-align: center; font-size: 2em;">鄧富琮</p>	
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)	
<b>2. Authorised Agent (if applicable) 獲授權代理人(如適用)</b>	
Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation* 先生/女士/公司/機構*)  <div style="text-align: right; border: 1px solid black; border-radius: 50%; padding: 10px; width: fit-content; margin: 0 auto;"> RECEIVED 24 APR 2023 Town Planning Board </div>	
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)	
<b>3. Details of the Representation 申述詳情</b>	
Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖(請註明草圖名稱及編號)	S/K22/URA1/1 明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0159



3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	長期鼠患, 汽車維修,吊到空氣 混濁 X
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	蚊蟲滋生 石屎剝落,流水 X
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	曝屎渠 衛生環境差 X
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.

若申述附有支持其論點的補充資料(例如彩色及/或大尺寸的圖則、規劃研究及技術評估),則須提供 90 份複本(或 40 份印文本和 50 份電子複本)。

<sup>@</sup> Please describe the particular matter in the plan to which the representation relates. Where the representation relates to an amendment to a plan, please specify the amendment item number provided in the Schedule of Proposed Amendments. 請形容圖則內與申述有關的指定事項,如申述與圖則的修訂有關,請註明在修訂項目附表內的修訂項目編號。


Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號



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	Date Received 收到日期	

- The representation should be made to the Town Planning Board (the Board) before the expiry of the specified plan exhibition period. The completed form and supporting documents (if any) should be sent to the Secretary, Town Planning Board, 15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong.  
申述必須於指定的圖則展示期限屆滿前向城市規劃委員會(下稱「委員會」)提出, 填妥的表格及支持有關申述的文件(倘有), 必須送交香港北角渣華道 333 號北角政府合署 15 樓城市規劃委員會秘書收。
- Please read the "Town Planning Board Guidelines on Submission and Publication of Representations, Comments on Representations and Further Representations" before you fill in this form. The Guidelines can be obtained from the Secretariat of the Board (15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong - Tel.: 2231 4810 or 2231 4835) and the Planning Enquiry Counters of the Planning Department (Hotline: 2231 5000) (17/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong and 14/F., Sha Tin Government Offices, 1 Sheung Wo Che Road, Sha Tin, New Territories), or downloaded from the Board's website at <http://www.info.gov.hk/tpb/>.  
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<b>1. Person Making this Representation (known as "Representer" hereafter)</b> 提出此宗申述的人士 (下稱「申述人」)	
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*) <i>CHAN PO SUM</i>	
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)	
<b>2. Authorised Agent (if applicable) 獲授權代理人(如適用)</b>	
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)	
	
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<b>3. Details of the Representation 申述詳情</b>	
Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖 (請註明草圖名稱及編號)	S/K22/URA1/1 明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0161

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
樓宇老化	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	室內石屏老化, 銹支外露,天花炭 粉經常落下.
結構不 安全	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	樓梯石屏結構有 裂開的問題 恐怕有危險
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.  
若申述附有支持其論點的補充資料(例如彩色及/或大尺寸的圖則、規劃研究及技術評估),則須提供 90 份複本(或 40 份印文本和 50 份電子複本)。

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Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號



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	Date Received 收到日期	

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申述必須於指定的圖則展示期限屆滿前向城市規劃委員會(下稱「委員會」)提出, 填妥的表格及支持有關申述的文件(倘有), 必須送交香港北角渣華道 333 號北角政府合署 15 樓城市規劃委員會秘書收。
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<b>1. Person Making this Representation (known as "Representer" hereafter)</b> 提出此宗申述的人士(下稱「申述人」)	
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)  李笑梅  (Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)	
<b>2. Authorised Agent (if applicable) 獲授權代理人(如適用)</b>	
Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation* 先生/女士/公司/機構*)             (Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)	
<b>3. Details of the Representation 申述詳情</b>	
Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖(請註明草圖名稱及編號)	S/K22/URA1/1 明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0162



3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	漏水、衛生問題
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.  
若申述附有支持其論點的補充資料(例如彩色及/或大尺寸的圖則、規劃研究及技術評估),則須提供 90 份複本(或 40 份印文本和 50 份電子複本)。

<sup>@</sup> Please describe the particular matter in the plan to which the representation relates. Where the representation relates to an amendment to a plan, please specify the amendment item number provided in the Schedule of Proposed Amendments. 請形容圖則內與申述有關的指定事項,如申述與圖則的修訂有關,請註明在修訂項目附表內的修訂項目編號。

Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號

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	Date Received 收到日期	

- The representation should be made to the Town Planning Board (the Board) before the expiry of the specified plan exhibition period. The completed form and supporting documents (if any) should be sent to the Secretary, Town Planning Board, 15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong.  
申述必須於指定的圖則展示期限屆滿前向城市規劃委員會(下稱「委員會」)提出, 填妥的表格及支持有關申述的文件(倘有), 必須送交香港北角渣華道 333 號北角政府合署 15 樓城市規劃委員會秘書收。
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<b>1. Person Making this Representation (known as "Representer" hereafter)</b> 提出此宗申述的人士(下稱「申述人」)	
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)	
	
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)	
<b>2. Authorised Agent (if applicable) 獲授權代理人(如適用)</b>	
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)	
	
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)	
<b>3. Details of the Representation 申述詳情</b>	
Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖(請註明草圖名稱及編號)	S/K22/URA1/1 明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0163

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	一屋頂石屎剝落 一窗口漏水 一衛生惡心
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.  
 若申述附有支持其論點的補充資料(例如彩色及/或大尺寸的圖則、規劃研究及技術評估),則須提供 90 份複本(或 40 份印文本和 50 份電子複本)。

<sup>@</sup> Please describe the particular matter in the plan to which the representation relates. Where the representation relates to an amendment to a plan, please specify the amendment item number provided in the Schedule of Proposed Amendments. 請形容圖則內與申述有關的指定事項,如申述與圖則的修訂有關,請註明在修訂項目附表內的修訂項目編號。

Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號



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	Date Received 收到日期	

- The representation should be made to the Town Planning Board (the Board) before the expiry of the specified plan exhibition period. The completed form and supporting documents (if any) should be sent to the Secretary, Town Planning Board, 15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong.  
申述必須於指定的圖則展示期限屆滿前向城市規劃委員會(下稱「委員會」)提出, 填妥的表格及支持有關申述的文件(倘有), 必須送交香港北角渣華道333號北角政府合署15樓城市規劃委員會秘書收。
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**1. Person Making this Representation (known as "Representer" hereafter)**  
提出此宗申述的人士(下稱「申述人」)

Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)

周芷琪

(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
(注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

**2. Authorised Agent (if applicable) 獲授權代理人(如適用)**

Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)



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**3. Details of the Representation 申述詳情**

Draft plan to which the representation relates (please specify the name and number of the draft plan)  
與申述相關的草圖(請註明草圖名稱及編號)

S/K22/URA1/1  
明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0164

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續) (如有需要, 請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	天花爆裂, 石屎剝落 天花板長期有水印, 樓上流水, 牆身發霉
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	樓梯有老鼠自由上落, 及常有陌生人在樓梯口 抽煙.
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話, 請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.  
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Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號



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	Date Received 收到日期	

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- Please read the "Town Planning Board Guidelines on Submission and Publication of Representations, Comments on Representations and Further Representations" before you fill in this form. The Guidelines can be obtained from the Secretariat of the Board (15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong - Tel.: 2231 4810 or 2231 4835) and the Planning Enquiry Counters of the Planning Department (Hotline: 2231 5000) (17/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong and 14/F., Sha Tin Government Offices, 1 Sheung Wo Che Road, Sha Tin, New Territories), or downloaded from the Board's website at <http://www.info.gov.hk/tpb/>.  
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**1. Person Making this Representation (known as "Representer" hereafter)**  
提出此宗申述的人士(下稱「申述人」)

Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)

林艷妮

(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
(注意:若個人提交,須填上與香港身份證/護照所載的全名)

**2. Authorised Agent (if applicable) 獲授權代理人(如適用)**

Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation\* 先生/女士/公司/機構\*)



(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
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**3. Details of the Representation 申述詳情**

Draft plan to which the representation relates (please specify the name and number of the draft plan)  
與申述相關的草圖(請註明草圖名稱及編號)

S/K22/URA1/1  
明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0165



3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	衛生差, 街旁到處垃圾 銅根外露, 滲漏水, 見石屎跌落
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	維修也不能長久 解決以上問題。
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話, 請註明詳情。		

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Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號

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	Date Received 收到日期	

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提出此宗申述的人士 (下稱「申述人」)

Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)

馮淑儀

(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
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Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation\* 先生/女士/公司/機構\*)



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S/K22/URA1/1  
明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

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3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

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	Date Received 收到日期	

- The representation should be made to the Town Planning Board (the Board) before the expiry of the specified plan exhibition period. The completed form and supporting documents (if any) should be sent to the Secretary, Town Planning Board, 15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong.  
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**1. Person Making this Representation (known as "Representer" hereafter)**  
提出此宗申述的人士 (下稱「申述人」)

Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)

CHAN JOHNZEN

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Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation\* 先生/女士/公司/機構\*)

NA



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(注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

**3. Details of the Representation 申述詳情**

Draft plan to which the representation relates (please specify the name and number of the draft plan)  
與申述相關的草圖 (請註明草圖名稱及編號)

S/K22/URA1/1  
明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0167

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	鋼棍剝落
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	間中漏水
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	有老鼠
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.  
若申述附有支持其論點的補充資料(例如彩色及/或大尺寸的圖則、規劃研究及技術評估),則須提供 90 份複本(或 40 份印文本和 50 份電子複本)。

<sup>@</sup> Please describe the particular matter in the plan to which the representation relates. Where the representation relates to an amendment to a plan, please specify the amendment item number provided in the Schedule of Proposed Amendments.請形容圖則內與申述有關的指定事項,如申述與圖則的修訂有關,請註明在修訂項目附表內的修訂項目編號。

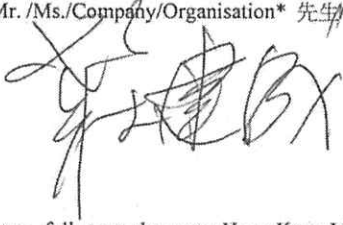
Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」


at the appropriate box 請在適當的方格內加上  號



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	Date Received 收到日期	

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申述必須於指定的圖則展示期限屆滿前向城市規劃委員會(下稱「委員會」)提出, 填妥的表格及支持有關申述的文件(倘有), 必須送交香港北角渣華道333號北角政府合署15樓城市規劃委員會秘書收。
- Please read the "Town Planning Board Guidelines on Submission and Publication of Representations, Comments on Representations and Further Representations" before you fill in this form. The Guidelines can be obtained from the Secretariat of the Board (15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong - Tel.: 2231 4810 or 2231 4835) and the Planning Enquiry Counters of the Planning Department (Hotline: 2231 5000) (17/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong and 14/F., Sha Tin Government Offices, 1 Sheung Wo Che Road, Sha Tin, New Territories), or downloaded from the Board's website at <http://www.info.gov.hk/tpb/>.  
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<b>1. Person Making this Representation (known as "Representer" hereafter)</b> 提出此宗申述的人士(下稱「申述人」)
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*) 
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

<b>2. Authorised Agent (if applicable) 獲授權代理人(如適用)</b>
Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation* 先生/女士/公司/機構*)

(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

<b>3. Details of the Representation 申述詳情</b>	
Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖(請註明草圖名稱及編號)	S/K22/URA1/1 明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0168



3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續) (如有需要, 請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	原擬擬中, 上撥進入屋 修路可修!
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話, 請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.  
 若申述附有支持其論點的補充資料(例如彩色及/或大尺寸的圖則、規劃研究及技術評估), 則須提供 90 份複本(或 40 份印文本和 50 份電子複本)。

<sup>@</sup> Please describe the particular matter in the plan to which the representation relates. Where the representation relates to an amendment to a plan, please specify the amendment item number provided in the Schedule of Proposed Amendments. 請形容圖則內與申述有關的指定事項, 如申述與圖則的修訂有關, 請註明在修訂項目附表內的修訂項目編號。

Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號

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	Date Received 收到日期	

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申述必須於指定的圖則展示期限屆滿前向城市規劃委員會(下稱「委員會」)提出, 填寫的表格及支持有關申述的文件(倘有), 必須送交香港北角渣華道 333 號北角政府合署 15 樓城市規劃委員會秘書收。
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**1. Person Making this Representation (known as "Representer" hereafter)**  
提出此宗申述的人士(下稱「申述人」)

Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)

(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
(注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

**2. Authorised Agent (if applicable) 獲授權代理人(如適用)**

Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)



(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
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**3. Details of the Representation 申述詳情**

Draft plan to which the representation relates (please specify the name and number of the draft plan)  
與申述相關的草圖(請註明草圖名稱及編號)

S/K22/URA1/1  
明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0169

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	彌水 鋼筋外露
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	牆身裂開
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	天花板漏油
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

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Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號



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	Date Received 收到日期	

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<b>1. Person Making this Representation (known as "Representer" hereafter)</b> 提出此宗申述的人士(下稱「申述人」)	
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)  AU Y (Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)	
<b>2. Authorised Agent (if applicable) 獲授權代理人(如適用)</b>	
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)   (Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)	
<b>3. Details of the Representation 申述詳情</b>	
Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖(請註明草圖名稱及編號)	S/K22/URA1/1 明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0170

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.  
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Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號



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申述必須於指定的圖則展示期限屆滿前向城市規劃委員會(下稱「委員會」)提出, 填妥的表格及支持有關申述的文件(倘有), 必須送交香港北角渣華道 333 號北角政府合署 15 樓城市規劃委員會秘書收。
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**1. Person Making this Representation (known as "Representer" hereafter)**  
提出此宗申述的人士(下稱「申述人」)

Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)

黃道

(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
(注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

**2. Authorised Agent (if applicable) 獲授權代理人(如適用)**

Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)



(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
(注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

**3. Details of the Representation 申述詳情**

Draft plan to which the representation relates (please specify the name and number of the draft plan)  
與申述相關的草圖(請註明草圖名稱及編號)

S/K22/URA1/1  
明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0171



3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	廚房位瀉水
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	石屎脫落
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.  
若申述附有支持其論點的補充資料(例如彩色及/或大尺寸的圖則、規劃研究及技術評估),則須提供 90 份複本(或 40 份印文本和 50 份電子複本)。

<sup>@</sup> Please describe the particular matter in the plan to which the representation relates. Where the representation relates to an amendment to a plan, please specify the amendment item number provided in the Schedule of Proposed Amendments. 請形容圖則內與申述有關的指定事項,如申述與圖則的修訂有關,請註明在修訂項目附表內的修訂項目編號。

Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號

For Official Use Only 請勿填寫此欄	Reference No. 檔案編號	TPB/R/S/K22/URA1/1- <b>151</b>
	Date Received 收到日期	

- The representation should be made to the Town Planning Board (the Board) before the expiry of the specified plan exhibition period. The completed form and supporting documents (if any) should be sent to the Secretary, Town Planning Board, 15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong.  
申述必須於指定的圖則展示期限屆滿前向城市規劃委員會(下稱「委員會」)提出。填妥的表格及支持有關申述的文件(倘有), 必須送交香港北角渣華道 333 號北角政府合署 15 樓城市規劃委員會秘書收。
- Please read the "Town Planning Board Guidelines on Submission and Publication of Representations, Comments on Representations and Further Representations" before you fill in this form. The Guidelines can be obtained from the Secretariat of the Board (15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong - Tel.: 2231 4810 or 2231 4835) and the Planning Enquiry Counters of the Planning Department (Hotline: 2231 5000) (17/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong and 14/F., Sha Tin Government Offices, 1 Sheung Wo Che Road, Sha Tin, New Territories), or downloaded from the Board's website at <http://www.info.gov.hk/tpb/>.  
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<b>1. Person Making this Representation (known as "Representer" hereafter)</b> 提出此宗申述的人士 (下稱「申述人」)	
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*) CHAN LAI YEE <i>aylthza</i> <i>Ch Lai yee</i> (Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)	
<b>2. Authorised Agent (if applicable) 獲授權代理人(如適用)*</b>	
Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation* 先生/女士/公司/機構*)  (Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)	
<b>3. Details of the Representation 申述詳情</b>	
Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖 (請註明草圖名稱及編號)	S/K22/URA1/1 明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」



0172

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	石屎剝落, 滲水
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話, 請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.  
 若申述附有支持其論點的補充資料(例如彩色及/或大尺寸的圖則、規劃研究及技術評估), 則須提供 90 份複本(或 40 份印文本和 50 份電子複本)。

<sup>@</sup> Please describe the particular matter in the plan to which the representation relates. Where the representation relates to an amendment to a plan, please specify the amendment item number provided in the Schedule of Proposed Amendments. 請形容圖則內與申述有關的指定事項, 如申述與圖則的修訂有關, 請註明在修訂項目附表內的修訂項目編號。

Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號



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	Date Received 收到日期	

- The representation should be made to the Town Planning Board (the Board) before the expiry of the specified plan exhibition period. The completed form and supporting documents (if any) should be sent to the Secretary, Town Planning Board, 15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong.  
申述必須於指定的圖則展示期限屆滿前向城市規劃委員會(下稱「委員會」)提出, 填妥的表格及支持有關申述的文件(倘有), 必須送交香港北角渣華道333號北角政府合署15樓城市規劃委員會秘書收。
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<b>1. Person Making this Representation (known as "Representer" hereafter)</b> 提出此宗申述的人士(下稱「申述人」)	
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)  梁寶霞	
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)	
<b>2. Authorised Agent (if applicable) 獲授權代理人(如適用)</b>	
Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation* 先生/女士/公司/機構*)  	
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)	
<b>3. Details of the Representation 申述詳情</b>	
Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖(請註明草圖名稱及編號)	S/K22/URA1/1 明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0173

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續) (如有需要, 請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	漏水
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	太多老鼠
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	石屎剝落
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話, 請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.  
若申述附有支持其論點的補充資料(例如彩色及/或大尺寸的圖則、規劃研究及技術評估), 則須提供 90 份複本(或 40 份印文本和 50 份電子複本)。

<sup>@</sup> Please describe the particular matter in the plan to which the representation relates. Where the representation relates to an amendment to a plan, please specify the amendment item number provided in the Schedule of Proposed Amendments. 請形容圖則內與申述有關的指定事項, 如申述與圖則的修訂有關, 請註明在修訂項目附表內的修訂項目編號。


Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號



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	Date Received 收到日期	

- The representation should be made to the Town Planning Board (the Board) before the expiry of the specified plan exhibition period. The completed form and supporting documents (if any) should be sent to the Secretary, Town Planning Board, 15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong.  
申述必須於指定的圖則展期屆滿前向城市規劃委員會(下稱「委員會」)提出, 填妥的表格及支持有關申述的文件(倘有), 必須送交香港北角渣華道 333 號北角政府合署 15 樓城市規劃委員會秘書收。
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<b>1. Person Making this Representation (known as "Representer" hereafter)</b> 提出此宗申述的人士 (下稱「申述人」)	
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)	
朱妙瑋	
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)	

<b>2. Authorised Agent (if applicable) 獲授權代理人(如適用)</b>	
Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation* 先生/女士/公司/機構*)	
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)	

<b>3. Details of the Representation 申述詳情</b>	
Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖 (請註明草圖名稱及編號)	S/K22/URA1/1 明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0174



3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	衛生差,有老鼠。 排水不暢。
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.  
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<sup>@</sup> Please describe the particular matter in the plan to which the representation relates. Where the representation relates to an amendment to a plan, please specify the amendment item number provided in the Schedule of Proposed Amendments. 請形容圖則內與申述有關的指定事項,如申述與圖則的修訂有關,請註明在修訂項目附表內的修訂項目編號。

Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號

For Official Use Only 請勿填寫此欄	Reference No. 檔案編號	<b>TPB/R/S/K22/URA1/1-154</b>
	Date Received 收到日期	

- The representation should be made to the Town Planning Board (the Board) before the expiry of the specified plan exhibition period. The completed form and supporting documents (if any) should be sent to the Secretary, Town Planning Board, 15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong.  
申述必須於指定的圖則展示期限屆滿前向城市規劃委員會(下稱「委員會」)提出, 填妥的表格及支持有關申述的文件(倘有), 必須送交香港北角渣華道 333 號北角政府合署 15 樓城市規劃委員會秘書收。
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填寫此表格之前, 請先細閱有關「根據城市規劃條例提交及公佈申述、對申述的意見及進一步申述」的城市規劃委員會規劃指引。這份指引可向委員會秘書處(香港北角渣華道 333 號北角政府合署 15 樓 - 電話: 2231 4810 或 2231 4835 及規劃署的規劃資料查詢處(熱線: 2231 5000)(香港北角渣華道 333 號北角政府合署 17 樓及新界沙田上禾輦路 1 號沙田政府合署 14 樓)索取, 亦可從委員會的網頁下載(網址: <http://www.info.gov.hk/tpb/>)。
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<b>1. Person Making this Representation (known as "Representer" hereafter)</b> 提出此宗申述的人士(下稱「申述人」)	
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)	
蔣雅翔	
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)	
<b>2. Authorised Agent (if applicable) 獲授權代理人(如適用)</b>	
Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation* 先生/女士/公司/機構*)	
	
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)	
<b>3. Details of the Representation 申述詳情</b>	
Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖(請註明草圖名稱及編號)	S/K22/URA1/1 明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0175

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	漏水
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.  
若申述附有支持其論點的補充資料(例如彩色及/或大尺寸的圖則、規劃研究及技術評估),則須提供 90 份複本(或 40 份印文本和 50 份電子複本)。

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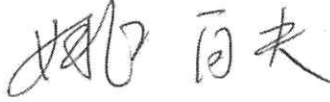
Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」


at the appropriate box 請在適當的方格內加上  號



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	Date Received 收到日期	

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<b>1. Person Making this Representation (known as "Representer" hereafter)</b> 提出此宗申述的人士(下稱「申述人」)
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)  
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

<b>2. Authorised Agent (if applicable) 獲授權代理人(如適用)</b>
Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation* 先生/女士/公司/機構*)  
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<b>3. Details of the Representation 申述詳情</b>	
Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖(請註明草圖名稱及編號)	S/K22/URA1/1 明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0176

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續) (如有需要, 請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	很差
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話, 請註明詳情。		

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Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號



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提出此宗申述的人士 (下稱「申述人」)

Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)

葉光裕

(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
(注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

**2. Authorised Agent (if applicable) 獲授權代理人(如適用)**

Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)



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**3. Details of the Representation 申述詳情**

Draft plan to which the representation relates (please specify the name and number of the draft plan)  
與申述相關的草圖 (請註明草圖名稱及編號)

S/K22/URA1/1  
明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0177



3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	滴水, 衛生差
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話, 請註明詳情。		

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Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號

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	Date Received 收到日期	

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**1. Person Making this Representation (known as "Representer" hereafter)**  
提出此宗申述的人士(下稱「申述人」)

Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)

王世

(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
(注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

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Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation\* 先生/女士/公司/機構\*)



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S/K22/URA1/1  
明倫街/馬頭角道

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	漏水
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

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<sup>@</sup> Please describe the particular matter in the plan to which the representation relates. Where the representation relates to an amendment to a plan, please specify the amendment item number provided in the Schedule of Proposed Amendments.請形容圖則內與申述有關的指定事項,如申述與圖則的修訂有關,請註明在修訂項目附表內的修訂項目編號。



Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號



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	Date Received 收到日期	

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申述必須於指定的圖則展示期限屆滿前向城市規劃委員會(下稱「委員會」)提出, 填妥的表格及支持有關申述的文件(倘有), 必須送交香港北角渣華道 333 號北角政府合署 15 樓城市規劃委員會秘書收。
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<b>1. Person Making this Representation (known as "Representer" hereafter)</b> 提出此宗申述的人士 (下稱「申述人」)	
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)	
馮杏玉	
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)	
<b>2. Authorised Agent (if applicable) 獲授權代理人(如適用)</b>	
Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation* 先生/女士/公司/機構*)	
	
	
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)	
<b>3. Details of the Representation 申述詳情</b>	
Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖 (請註明草圖名稱及編號)	S/K22/URA1/1 明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0179

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	漏水 危樓
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	環境極差
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

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Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號



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**1. Person Making this Representation (known as "Representer" hereafter)**  
提出此宗申述的人士 (下稱「申述人」)

Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)

王美玲

(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
(注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

**2. Authorised Agent (if applicable) 獲授權代理人(如適用)**

Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)



(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
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**3. Details of the Representation 申述詳情**

Draft plan to which the representation relates (please specify the name and number of the draft plan)  
與申述相關的草圖 (請註明草圖名稱及編號)

S/K22/URA1/1  
明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0180



3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	漏水維修后 都漏水
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

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Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號

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**1. Person Making this Representation (known as "Representer" hereafter)**  
提出此宗申述的人士（下稱「申述人」）

Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)

羅志芳

(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
(注意：若個人提交，須填上與香港身份證／護照所載的全名)

**2. Authorised Agent (if applicable) 獲授權代理人(如適用)**

Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation\* 先生/女士/公司/機構\*)



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Draft plan to which the representation relates (please specify the name and number of the draft plan)  
與申述相關的草圖（請註明草圖名稱及編號）

S/K22/URA1/1  
明倫街／馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0181

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	環境衛生超差
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.  
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Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號



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提出此宗申述的人士(下稱「申述人」)

Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)

孔 永 成

(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
(注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

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Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)

\_\_\_\_\_



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S/K22/URA1/1  
明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
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0182

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	雨季風季快到了, 居於危樓中,家人 天天擔心,希望盡快 出價收購,搬走, 脫離苦海。
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.

若申述附有支持其論點的補充資料(例如彩色及/或大尺寸的圖則、規劃研究及技術評估),則須提供 90 份複本(或 40 份印文本和 50 份電子複本)。

<sup>@</sup> Please describe the particular matter in the plan to which the representation relates. Where the representation relates to an amendment to a plan, please specify the amendment item number provided in the Schedule of Proposed Amendments. 請形容圖則內與申述有關的指定事項,如申述與圖則的修訂有關,請註明在修訂項目附表內的修訂項目編號。

Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號



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	Date Received 收到日期	

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申述必須於指定的圖則展示期限屆滿前向城市規劃委員會(下稱「委員會」)提出, 填妥的表格及支持有關申述的文件(倘有), 必須送交香港北角渣華道 333 號北角政府合署 15 樓城市規劃委員會秘書收。
- Please read the "Town Planning Board Guidelines on Submission and Publication of Representations, Comments on Representations and Further Representations" before you fill in this form. The Guidelines can be obtained from the Secretariat of the Board (15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong - Tel.: 2231 4810 or 2231 4835) and the Planning Enquiry Counters of the Planning Department (Hotline: 2231 5000) (17/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong and 14/F., Sha Tin Government Offices, 1 Sheung Wo Che Road, Sha Tin, New Territories), or downloaded from the Board's website at <http://www.info.gov.hk/tpb/>.  
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**1. Person Making this Representation (known as "Representer" hereafter)**  
提出此宗申述的人士(下稱「申述人」)

Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* (先生/女士/公司/機構\*))

CHENG SI TO

(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
(注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

**2. Authorised Agent (if applicable) 獲授權代理人(如適用)**

Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* (先生/女士/公司/機構\*))



(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
(注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

**3. Details of the Representation 申述詳情**

Draft plan to which the representation relates (please specify the name and number of the draft plan)  
與申述相關的草圖(請註明草圖名稱及編號)

S/K22/URA1/1  
明倫街/馬頭角道



3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
清拆 重建	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	1) 樓齡太久 2) 日久失修, 太危險 3) 石屎掉下 4) 修補無用
	<input type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話, 請註明詳情。		

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<sup>@</sup> Please describe the particular matter in the plan to which the representation relates. Where the representation relates to an amendment to a plan, please specify the amendment item number provided in the Schedule of Proposed Amendments. 請形容圖則內與申述有關的指定事項, 如申述與圖則的修訂有關, 請註明在修訂項目附表內的修訂項目編號。


Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號

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申述必須於指定的圖則展示期限屆滿前向城市規劃委員會（下稱「委員會」）提出，填妥的表格及支持有關申述的文件（倘有），必須送交香港北角渣華道 333 號北角政府合署 15 樓城市規劃委員會秘書收。
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<b>1. Person Making this Representation (known as "Representer" hereafter)</b> 提出此宗申述的人士（下稱「申述人」）
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)  劉健生
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意：若個人提交，須填上與香港身份證／護照所載的全名)

<b>2. Authorised Agent (if applicable) 獲授權代理人(如適用)</b>
Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation* 先生/女士/公司/機構*)  
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意：若個人提交，須填上與香港身份證／護照所載的全名)

<b>3. Details of the Representation 申述詳情</b>	
Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖（請註明草圖名稱及編號）	S/K22/URA1/1 明倫街／馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0184

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續) (如有需要, 請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	燙水
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話, 請註明詳情。		

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Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號



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<b>1. Person Making this Representation (known as "Representer" hereafter)</b> 提出此宗申述的人士(下稱「申述人」)	
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)	
	
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)	
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Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖(請註明草圖名稱及編號)	S/K22/URA1/1 明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0185

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	1) 衛生差, 2) 鋼筋剝落 3) 漏水嚴重
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

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Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號



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提出此宗申述的人士(下稱「申述人」)

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何楚欣

(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
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**2. Authorised Agent (if applicable) 獲授權代理人(如適用)**

Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation\* 先生/女士/公司/機構\*)



(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
(注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

**3. Details of the Representation 申述詳情**

Draft plan to which the representation relates (please specify the name and number of the draft plan)  
與申述相關的草圖(請註明草圖名稱及編號)

S/K22/URA1/1  
明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0186



3. Details of the Representation (Continued) (use separate sheet if necessary) 申述詳情(續) (如有需要, 請另頁說明)#		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項@	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	全部支持城規會的規劃
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	同上
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	同上
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話, 請註明詳情。		

# If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.  
若申述附有支持其論點的補充資料(例如彩色及/或大尺寸的圖則、規劃研究及技術評估), 則須提供 90 份複本(或 40 份印文本和 50 份電子複本)。

@ Please describe the particular matter in the plan to which the representation relates. Where the representation relates to an amendment to a plan, please specify the amendment item number provided in the Schedule of Proposed Amendments. 請形容圖則內與申述有關的指定事項, 如申述與圖則的修訂有關, 請註明在修訂項目附表內的修訂項目編號。

Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號

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	Date Received 收到日期	

- The representation should be made to the Town Planning Board (the Board) before the expiry of the specified plan exhibition period. The completed form and supporting documents (if any) should be sent to the Secretary, Town Planning Board, 15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong.  
申述必須於指定的圖則展示期限屆滿前向城市規劃委員會(下稱「委員會」)提出, 填妥的表格及支持有關申述的文件(倘有), 必須送交香港北角渣華道 333 號北角政府合署 15 樓城市規劃委員會秘書收。
- Please read the "Town Planning Board Guidelines on Submission and Publication of Representations, Comments on Representations and Further Representations" before you fill in this form. The Guidelines can be obtained from the Secretariat of the Board (15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong - Tel.: 2231 4810 or 2231 4835) and the Planning Enquiry Counters of the Planning Department (Hotline: 2231 5000) (17/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong and 14/F., Sha Tin Government Offices, 1 Sheung Wo Che Road, Sha Tin, New Territories), or downloaded from the Board's website at <http://www.info.gov.hk/tpb/>.  
填寫此表格之前, 請先細閱有關「根據城市規劃條例提交及公佈申述、對申述的意見及進一步申述」的城市規劃委員會規劃指引。這份指引可向委員會秘書處(香港北角渣華道 333 號北角政府合署 15 樓 - 電話: 2231 4810 或 2231 4835 及規劃署的規劃資料查詢處(熱線: 2231 5000)(香港北角渣華道 333 號北角政府合署 17 樓及新界沙田上禾輦路 1 號沙田政府合署 14 樓)索取, 亦可從委員會的網頁下載(網址: <http://www.info.gov.hk/tpb/>)。
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<b>1. Person Making this Representation (known as "Representer" hereafter)</b> 提出此宗申述的人士 (下稱「申述人」)
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)  羅德光  (Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

<b>2. Authorised Agent (if applicable) 獲授權代理人(如適用)</b>	RECEIVED 24 APR 2023 Town Planning Board
Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation* 先生/女士/公司/機構*)   (Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)	

<b>3. Details of the Representation 申述詳情</b>	
Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖 (請註明草圖名稱及編號)	S/K22/URA1/1 明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0187

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續) (如有需要, 請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	牆身及天花頂長期漏水。 長期脫灰加銹, 受到很大精神压力!
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	大廈衛生環境非常差。 走廊長期堆積垃圾。 街道渠渠爆裂漏水引致極度臭味, 影響居民的健康!
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	附近无社區設施及社福設施。 期望市建局能够加快重建五街改善居民的环境!
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話, 請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.

若申述附有支持其論點的補充資料(例如彩色及/或大尺寸的圖則、規劃研究及技術評估), 則須提供 90 份複本(或 40 份印文本和 50 份電子複本)。

<sup>@</sup> Please describe the particular matter in the plan to which the representation relates. Where the representation relates to an amendment to a plan, please specify the amendment item number provided in the Schedule of Proposed Amendments. 請形容圖則內與申述有關的指定事項, 如申述與圖則的修訂有關, 請註明在修訂項目附表內的修訂項目編號。

Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號



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	Date Received 收到日期	

- The representation should be made to the Town Planning Board (the Board) before the expiry of the specified plan exhibition period. The completed form and supporting documents (if any) should be sent to the Secretary, Town Planning Board, 15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong.  
申述必須於指定的圖則展示期限屆滿前向城市規劃委員會(下稱「委員會」)提出, 填妥的表格及支持有關申述的文件(倘有), 必須送交香港北角渣華道 333 號北角政府合署 15 樓城市規劃委員會秘書收。
- Please read the "Town Planning Board Guidelines on Submission and Publication of Representations, Comments on Representations and Further Representations" before you fill in this form. The Guidelines can be obtained from the Secretariat of the Board (15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong - Tel.: 2231 4810 or 2231 4835) and the Planning Enquiry Counters of the Planning Department (Hotline: 2231 5000) (17/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong and 14/F., Sha Tin Government Offices, 1 Sheung Wo Che Road, Sha Tin, New Territories), or downloaded from the Board's website at <http://www.info.gov.hk/tpb/>.  
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<b>1. Person Making this Representation (known as "Representer" hereafter)</b> 提出此宗申述的人士(下稱「申述人」)
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)  朱鳳娟
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

<b>2. Authorised Agent (if applicable) 獲授權代理人(如適用)</b>
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)



<b>3. Details of the Representation 申述詳情</b>	
Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖(請註明草圖名稱及編號)	S/K22/URA1/1 明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0188

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	環境衛生署
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.  
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<sup>@</sup> Please describe the particular matter in the plan to which the representation relates. Where the representation relates to an amendment to a plan, please specify the amendment item number provided in the Schedule of Proposed Amendments. 請形容圖則內與申述有關的指定事項,如申述與圖則的修訂有關,請註明在修訂項目附表內的修訂項目編號。


Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號



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	Date Received 收到日期	

- The representation should be made to the Town Planning Board (the Board) before the expiry of the specified plan exhibition period. The completed form and supporting documents (if any) should be sent to the Secretary, Town Planning Board, 15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong.  
申述必須於指定的圖則展期屆滿前向城市規劃委員會（下稱「委員會」）提出，填妥的表格及支持有關申述的文件（倘有），必須送交香港北角渣華道 333 號北角政府合署 15 樓城市規劃委員會秘書收。
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<b>1. Person Making this Representation (known as "Representer" hereafter)</b> 提出此宗申述的人士（下稱「申述人」）	
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)   (Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意：若個人提交，須填上與香港身份證／護照所載的全名)	
<b>2. Authorised Agent (if applicable) 獲授權代理人(如適用)</b>	
Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation* 先生/女士/公司/機構*)   (Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意：若個人提交，須填上與香港身份證／護照所載的全名)	
<b>3. Details of the Representation 申述詳情</b>	
Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖（請註明草圖名稱及編號）	S/K22/URA1/1 明倫街／馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0189



3. Details of the Representation (Continued) (use separate sheet if necessary)<sup>#</sup>  
 申述詳情(續)(如有需要,請另頁說明)<sup>#</sup>

Nature of and reasons for the representation 申述的性質及理由

Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	

Any proposed amendments to the draft plan? If yes, please specify the details.  
 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。

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Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號

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申述必須於指定的圖則展示期限屆滿前向城市規劃委員會(下稱「委員會」)提出, 填妥的表格及支持有關申述的文件(倘有), 必須送交香港北角渣華道 333 號北角政府合署 15 樓城市規劃委員會秘書收。
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<b>1. Person Making this Representation (known as "Representer" hereafter)</b> 提出此宗申述的人士 (下稱「申述人」)	
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)  何冠球  (Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)	
<b>2. Authorised Agent (if applicable) 獲授權代理人(如適用)</b>	
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)    (Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)	
<b>3. Details of the Representation 申述詳情</b>	
Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖 (請註明草圖名稱及編號)	S/K22/URA1/1 明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0190

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	以上全部支持
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	同上
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	同上
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.  
若申述附有支持其論點的補充資料(例如彩色及/或大尺寸的圖則、規劃研究及技術評估),則須提供 90 份複本(或 40 份印文本和 50 份電子複本)。

<sup>@</sup> Please describe the particular matter in the plan to which the representation relates. Where the representation relates to an amendment to a plan, please specify the amendment item number provided in the Schedule of Proposed Amendments. 請形容圖則內與申述有關的指定事項,如申述與圖則的修訂有關,請註明在修訂項目附表內的修訂項目編號。

Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號



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- The representation should be made to the Town Planning Board (the Board) before the expiry of the specified plan exhibition period. The completed form and supporting documents (if any) should be sent to the Secretary, Town Planning Board, 15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong.  
申述必須於指定的圖則展示期限屆滿前向城市規劃委員會(下稱「委員會」)提出, 填妥的表格及支持有關申述的文件(倘有), 必須送交香港北角渣華道 333 號北角政府合署 15 樓城市規劃委員會秘書收。
- Please read the "Town Planning Board Guidelines on Submission and Publication of Representations, Comments on Representations and Further Representations" before you fill in this form. The Guidelines can be obtained from the Secretariat of the Board (15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong - Tel.: 2231 4810 or 2231 4835) and the Planning Enquiry Counters of the Planning Department (Hotline: 2231 5000) (17/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong and 14/F., Sha Tin Government Offices, 1 Sheung Wo Che Road, Sha Tin, New Territories), or downloaded from the Board's website at <http://www.info.gov.hk/tpb/>.  
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### 1. Person Making this Representation (known as "Representer" hereafter)

提出此宗申述的人士 (下稱「申述人」)

Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)

何冠球

(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
(注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

### 2. Authorised Agent (if applicable) 獲授權代理人(如適用)

Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation\* 先生/女士/公司/機構\*)



(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
(注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

### 3. Details of the Representation 申述詳情

Draft plan to which the representation relates (please specify the name and number of the draft plan)  
與申述相關的草圖 (請註明草圖名稱及編號)

S/K22/URA1/1  
明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

3. Details of the Representation (Continued) (use separate sheet if necessary) 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	很多牆身裂開,每逢下雨 漏水,令居民徹夜未停, 甚至要到親友家中暫住。
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	五街的樓宇欠缺管理, 是三無大廈,又缺乏公眾 設施,這些問題只存靠 重建才能處理。
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	期望市建局回應居民的訴 求,盡快重建五街,這樣 才能徹底改善居民的 住屋環境。
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.  
 若申述附有支持其論點的補充資料(例如彩色及/或大尺寸的圖則、規劃研究及技術評估),則須提供 90 份複本(或 40 份印文本和 50 份電子複本)。

<sup>@</sup> Please describe the particular matter in the plan to which the representation relates. Where the representation relates to an amendment to a plan, please specify the amendment item number provided in the Schedule of Proposed Amendments. 請形容圖則內與申述有關的指定事項,如申述與圖則的修訂有關,請註明在修訂項目附表內的修訂項目編號。

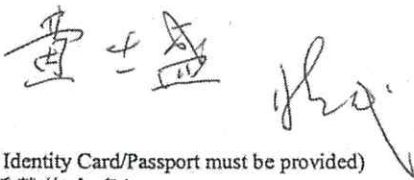
Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」


at the appropriate box 請在適當的方格內加上  號



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申述必須於指定的圖則展示期限屆滿前向城市規劃委員會(下稱「委員會」)提出, 填妥的表格及支持有關申述的文件(倘有), 必須送交香港北角渣華道 333 號北角政府合署 15 樓城市規劃委員會秘書收。
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<b>1. Person Making this Representation (known as "Representer" hereafter)</b> 提出此宗申述的人士(下稱「申述人」)
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)  
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

<b>2. Authorised Agent (if applicable) 獲授權代理人(如適用)</b>
Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation* 先生/女士/公司/機構*)  
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

<b>3. Details of the Representation 申述詳情</b>	
Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖(請註明草圖名稱及編號)	S/K22/URA1/1 明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0191



3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	衛生不好 日久失修
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.

若申述附有支持其論點的補充資料(例如彩色及/或大尺寸的圖則、規劃研究及技術評估),則須提供 90 份複本(或 40 份印文本和 50 份電子複本)。


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Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號

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	Date Received 收到日期	

- The representation should be made to the Town Planning Board (the Board) before the expiry of the specified plan exhibition period. The completed form and supporting documents (if any) should be sent to the Secretary, Town Planning Board, 15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong.  
申述必須於指定的圖則展示期限屆滿前向城市規劃委員會(下稱「委員會」)提出, 填妥的表格及支持有關申述的文件(倘有) · 必須送交香港北角渣華道 333 號北角政府合署 15 樓城市規劃委員會秘書收。
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<b>1. Person Making this Representation (known as "Representer" hereafter)</b> 提出此宗申述的人士 (下稱「申述人」)	
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)  黃松解	
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)	
<b>2. Authorised Agent (if applicable) 獲授權代理人(如適用)</b>	
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)  	
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)	
<b>3. Details of the Representation 申述詳情</b>	
Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖 (請註明草圖名稱及編號)	S/K22/URA1/1 明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0192

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	衛生差
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.  
若申述附有支持其論點的補充資料(例如彩色及/或大尺寸的圖則、規劃研究及技術評估),則須提供 90 份複本(或 40 份印文本和 50 份電子複本)。

<sup>@</sup> Please describe the particular matter in the plan to which the representation relates. Where the representation relates to an amendment to a plan, please specify the amendment item number provided in the Schedule of Proposed Amendments.請形容圖則內與申述有關的指定事項,如申述與圖則的修訂有關,請註明在修訂項目附表內的修訂項目編號。

Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號



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	Date Received 收到日期	

- The representation should be made to the Town Planning Board (the Board) before the expiry of the specified plan exhibition period. The completed form and supporting documents (if any) should be sent to the Secretary, Town Planning Board, 15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong.  
申述必須於指定的圖則展示期限屆滿前向城市規劃委員會(下稱「委員會」)提出, 填妥的表格及支持有關申述的文件(倘有), 必須送交香港北角渣華道 333 號北角政府合署 15 樓城市規劃委員會秘書收。
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**1. Person Making this Representation (known as "Representer" hereafter)**  
提出此宗申述的人士 (下稱「申述人」)

Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)

彭賜臻

(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
(注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

**2. Authorised Agent (if applicable) 獲授權代理人(如適用)**

Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)



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**3. Details of the Representation 申述詳情**

Draft plan to which the representation relates (please specify the name and number of the draft plan)  
與申述相關的草圖 (請註明草圖名稱及編號)

S/K22/URA1/1  
明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0193

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	流水
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.  
若申述附有支持其論點的補充資料(例如彩色及/或大尺寸的圖則、規劃研究及技術評估),則須提供 90 份複本(或 40 份印文本和 50 份電子複本)。

<sup>@</sup> Please describe the particular matter in the plan to which the representation relates. Where the representation relates to an amendment to a plan, please specify the amendment item number provided in the Schedule of Proposed Amendments. 請形容圖則內與申述有關的指定事項,如申述與圖則的修訂有關,請註明在修訂項目附表內的修訂項目編號。

Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號



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	Date Received 收到日期	

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**1. Person Making this Representation (known as "Representer" hereafter)**  
提出此宗申述的人士(下稱「申述人」)

Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)

梁森元

(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
(注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

**2. Authorised Agent (if applicable) 獲授權代理人(如適用)**

Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation\* 先生/女士/公司/機構\*)



(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
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**3. Details of the Representation 申述詳情**

Draft plan to which the representation relates (please specify the name and number of the draft plan)  
與申述相關的草圖(請註明草圖名稱及編號)

S/K22/URA1/1  
明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0195



3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	衛生環境 差
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.  
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Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號

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	Date Received 收到日期	

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提出此宗申述的人士(下稱「申述人」)

Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)

劉益忠

(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
(注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

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Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)



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與申述相關的草圖(請註明草圖名稱及編號)

S/K22/URA1/1  
明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
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0196

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	日久失修 危樓!
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.  
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Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號



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	Date Received 收到日期	

- The representation should be made to the Town Planning Board (the Board) before the expiry of the specified plan exhibition period. The completed form and supporting documents (if any) should be sent to the Secretary, Town Planning Board, 15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong.  
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提出此宗申述的人士(下稱「申述人」)

Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)

*(Handwritten signature)*

(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
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Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)



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S/K22/URA1/1  
明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
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0197

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	供水. 石原制港.
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話, 請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.  
 若申述附有支持其論點的補充資料(例如彩色及/或大尺寸的圖則、規劃研究及技術評估), 則須提供 90 份複本(或 40 份印文本和 50 份電子複本)。

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Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號



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	Date Received 收到日期	

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申述必須於指定的圖則展示期限屆滿前向城市規劃委員會(下稱「委員會」)提出, 填妥的表格及支持有關申述的文件(倘有), 必須送交香港北角渣華道 333 號北角政府合署 15 樓城市規劃委員會秘書收。
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**1. Person Making this Representation (known as "Representer" hereafter)**  
提出此宗申述的人士 (下稱「申述人」)

Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)

陳武煊

(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
(注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

**2. Authorised Agent (if applicable) 獲授權代理人(如適用)**

Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)



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**3. Details of the Representation 申述詳情**

Draft plan to which the representation relates (please specify the name and number of the draft plan)  
與申述相關的草圖 (請註明草圖名稱及編號)

S/K22/URA1/1  
明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0198



3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	漏水
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

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Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號

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<b>1. Person Making this Representation (known as "Representer" hereafter)</b> 提出此宗申述的人士(下稱「申述人」)
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)  
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

<b>2. Authorised Agent (if applicable) 獲授權代理人(如適用)</b>	
Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation* 先生/女士/公司/機構*)	
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)	

<b>3. Details of the Representation 申述詳情</b>	
Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖(請註明草圖名稱及編號)	S/K22/URA1/1 明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0199

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	漏水
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

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**1. Person Making this Representation (known as "Representer" hereafter)**  
提出此宗申述的人士(下稱「申述人」)

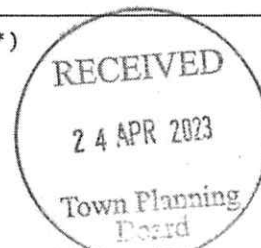
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)

馮文健 黃子爵 聯名業主

(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
(注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

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S/K22/URA1/1 ✓  
明倫街/馬頭角道 ✓

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0200

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
① 樓宇狀況  ② 樓宇管理 環境衛生	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	完全反映事實
③ 社區面貌  ④ 優化海濱	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	完全反映事實
⑤ 交通改善  ⑥ 支持一同 重建新寧 工商中心	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	完全反映事實
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

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Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號



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(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)	
<b>3. Details of the Representation 申述詳情</b>	
Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖(請註明草圖名稱及編號)	S/K22/URA1/1 明倫街/馬頭角道

\* Delete as appropriate: 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0201



3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	鋼筋外露
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.  
若申述附有支持其論點的補充資料(例如彩色及/或大尺寸的圖則、規劃研究及技術評估),則須提供 90 份覆本(或 40 份印文本和 50 份電子覆本)。

<sup>@</sup> Please describe the particular matter in the plan to which the representation relates. Where the representation relates to an amendment to a plan, please specify the amendment item number provided in the Schedule of Proposed Amendments.請形容圖則內與申述有關的指定事項,如申述與圖則的修訂有關,請註明在修訂項目附表內的修訂項目編號。

Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號

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	Date Received 收到日期	

- The representation should be made to the Town Planning Board (the Board) before the expiry of the specified plan exhibition period. The completed form and supporting documents (if any) should be sent to the Secretary, Town Planning Board, 15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong.  
申述必須於指定的圖則展示期限屆滿前向城市規劃委員會(下稱「委員會」)提出, 填妥的表格及支持有關申述的文件(倘有), 必須送交香港北角渣華道333號北角政府合署15樓城市規劃委員會秘書收。
- Please read the "Town Planning Board Guidelines on Submission and Publication of Representations, Comments on Representations and Further Representations" before you fill in this form. The Guidelines can be obtained from the Secretariat of the Board (15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong - Tel.: 2231 4810 or 2231 4835) and the Planning Enquiry Counters of the Planning Department (Hotline: 2231 5000) (17/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong and 14/F., Sha Tin Government Offices, 1 Sheung Wo Che Road, Sha Tin, New Territories), or downloaded from the Board's website at <http://www.info.gov.hk/tpb/>.  
填寫此表格之前, 請先細閱有關「根據城市規劃條例提交及公佈申述、對申述的意見及進一步申述」的城市規劃委員會規劃指引。這份指引可向委員會秘書處(香港北角渣華道333號北角政府合署15樓 - 電話: 2231 4810 或 2231 4835 及規劃署的規劃資料查詢處(熱線: 2231 5000)(香港北角渣華道333號北角政府合署17樓及新界沙田上禾輦路1號沙田政府合署14樓)索取, 亦可從委員會的網頁下載(網址: <http://www.info.gov.hk/tpb/>)。
- This form can be downloaded from the Board's website, and obtained from the Secretariat of the Board and the Planning Enquiry Counters of the Planning Department. The form should be typed or completed in block letters, preferably in both English and Chinese. The representation may be treated as not having been made if the required information is not provided.  
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**1. Person Making this Representation (known as "Representer" hereafter)**  
提出此宗申述的人士(下稱「申述人」)

Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)

王景

(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
(注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

**2. Authorised Agent (if applicable) 獲授權代理人(如適用)**

Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation\* 先生/女士/公司/機構\*)



(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
(注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

**3. Details of the Representation 申述詳情**

Draft plan to which the representation relates (please specify the name and number of the draft plan)  
與申述相關的草圖(請註明草圖名稱及編號)

S/K22/URA1/1  
明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0202

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	有漏水
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.  
 若申述附有支持其論點的補充資料(例如彩色及/或大尺寸的圖則、規劃研究及技術評估),則須提供 90 份複本(或 40 份印文本和 50 份電子複本)。

<sup>@</sup> Please describe the particular matter in the plan to which the representation relates. Where the representation relates to an amendment to a plan, please specify the amendment item number provided in the Schedule of Proposed Amendments.請形容圖則內與申述有關的指定事項,如申述與圖則的修訂有關,請註明在修訂項目附表內的修訂項目編號。

Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號



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	Date Received 收到日期	

- The representation should be made to the Town Planning Board (the Board) before the expiry of the specified plan exhibition period. The completed form and supporting documents (if any) should be sent to the Secretary, Town Planning Board, 15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong.  
申述必須於指定的圖則展示期限屆滿前向城市規劃委員會(下稱「委員會」)提出, 填妥的表格及支持有關申述的文件(倘有), 必須送交香港北角渣華道 333 號北角政府合署 15 樓城市規劃委員會秘書收。
- Please read the "Town Planning Board Guidelines on Submission and Publication of Representations, Comments on Representations and Further Representations" before you fill in this form. The Guidelines can be obtained from the Secretariat of the Board (15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong - Tel.: 2231 4810 or 2231 4835) and the Planning Enquiry Counters of the Planning Department (Hotline: 2231 5000) (17/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong and 14/F., Sha Tin Government Offices, 1 Sheung Wo Che Road, Sha Tin, New Territories), or downloaded from the Board's website at <http://www.info.gov.hk/tpb/>.  
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此表格可從委員會的網頁下載, 亦可向委員會秘書處及規劃署的規劃資料查詢處索取。提出申述的人士須以打印方式或以正楷填寫表格, 填寫的資料宜中英文兼備。倘若未能提供所需資料, 則委員會可把有關申述視為不曾提出論。

<b>1. Person Making this Representation (known as "Representer" hereafter)</b> 提出此宗申述的人士 (下稱「申述人」)	
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)	
	
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)	
<b>2. Authorised Agent (if applicable) 獲授權代理人(如適用)</b>	
Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation* 先生/女士/公司/機構*)	
	
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)	
<b>3. Details of the Representation 申述詳情</b>	
Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖 (請註明草圖名稱及編號)	S/K22/URA1/1 明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0203

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	天井衛生差
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.

若申述附有支持其論點的補充資料(例如彩色及/或大尺寸的圖則、規劃研究及技術評估),則須提供 90 份複本(或 40 份印文本和 50 份電子複本)。

<sup>@</sup> Please describe the particular matter in the plan to which the representation relates. Where the representation relates to an amendment to a plan, please specify the amendment item number provided in the Schedule of Proposed Amendments.請形容圖則內與申述有關的指定事項,如申述與圖則的修訂有關,請註明在修訂項目附表內的修訂項目編號。

Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」


at the appropriate box 請在適當的方格內加上  號



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	Date Received 收到日期	

- The representation should be made to the Town Planning Board (the Board) before the expiry of the specified plan exhibition period. The completed form and supporting documents (if any) should be sent to the Secretary, Town Planning Board, 15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong.  
申述必須於指定的圖則展示期限屆滿前向城市規劃委員會(下稱「委員會」)提出, 填妥的表格及支持有關申述的文件(倘有), 必須送交香港北角渣華道 333 號北角政府合署 15 樓城市規劃委員會秘書收。
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<b>1. Person Making this Representation (known as "Representer" hereafter)</b> 提出此宗申述的人士 (下稱「申述人」)
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)  余巧堯
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

<b>2. Authorised Agent (if applicable) 獲授權代理人(如適用)</b>
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)  
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

<b>3. Details of the Representation 申述詳情</b>	
Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖 (請註明草圖名稱及編號)	S/K22/URA1/1 明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0204



3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	石糞脫落
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.

若申述附有支持其論點的補充資料(例如彩色及/或大尺寸的圖則、規劃研究及技術評估),則須提供 90 份複本(或 40 份印文本和 50 份電子複本)。

<sup>@</sup> Please describe the particular matter in the plan to which the representation relates. Where the representation relates to an amendment to a plan, please specify the amendment item number provided in the Schedule of Proposed Amendments.請形容圖則內與申述有關的指定事項,如申述與圖則的修訂有關,請註明在修訂項目附表內的修訂項目編號。

Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號

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	Date Received 收到日期	

- The representation should be made to the Town Planning Board (the Board) before the expiry of the specified plan exhibition period. The completed form and supporting documents (if any) should be sent to the Secretary, Town Planning Board, 15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong.  
申述必須於指定的圖則展示期限屆滿前向城市規劃委員會(下稱「委員會」)提出, 填妥的表格及支持有關申述的文件(倘有), 必須送交香港北角渣華道 333 號北角政府合署 15 樓城市規劃委員會秘書收。
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**1. Person Making this Representation (known as "Representer" hereafter)**  
提出此宗申述的人士 (下稱「申述人」)

Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)

Ms Mang Koi Fong

(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
(注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

**2. Authorised Agent (if applicable) 獲授權代理人(如適用)**

Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)

/



(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
(注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

**3. Details of the Representation 申述詳情**

Draft plan to which the representation relates (please specify the name and number of the draft plan)  
與申述相關的草圖 (請註明草圖名稱及編號)

S/K22/URA1/1  
明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0205

**3. Details of the Representation (Continued) (use separate sheet if necessary)<sup>#</sup>**  
**申述詳情(續) (如有需要, 請另頁說明)<sup>#</sup>**

Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	漏水 石屎爛晒剝落
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	

Any proposed amendments to the draft plan? If yes, please specify the details.  
 對草圖是否有任何擬議修訂? 如有的話, 請註明詳情。

無

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.  
 若申述附有支持其論點的補充資料(例如彩色及/或大尺寸的圖則、規劃研究及技術評估), 則須提供 90 份複本(或 40 份印文本和 50 份電子複本)。

<sup>@</sup> Please describe the particular matter in the plan to which the representation relates. Where the representation relates to an amendment to a plan, please specify the amendment item number provided in the Schedule of Proposed Amendments. 請形容圖則內與申述有關的指定事項, 如申述與圖則的修訂有關, 請註明在修訂項目附表內的修訂項目編號。

Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號



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	Date Received 收到日期	

- The representation should be made to the Town Planning Board (the Board) before the expiry of the specified plan exhibition period. The completed form and supporting documents (if any) should be sent to the Secretary, Town Planning Board, 15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong.  
申述必須於指定的圖則展示期限屆滿前向城市規劃委員會(下稱「委員會」)提出, 填妥的表格及支持有關申述的文件(倘有) · 必須送交香港北角渣華道 333 號北角政府合署 15 樓城市規劃委員會秘書處。
- Please read the "Town Planning Board Guidelines on Submission and Publication of Representations, Comments on Representations and Further Representations" before you fill in this form. The Guidelines can be obtained from the Secretariat of the Board (15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong - Tel.: 2231 4810 or 2231 4835) and the Planning Enquiry Counters of the Planning Department (Hotline: 2231 5000) (17/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong and 14/F., Sha Tin Government Offices, 1 Sheung Wo Che Road, Sha Tin, New Territories), or downloaded from the Board's website at <http://www.info.gov.hk/tpb/>.  
填寫此表格之前, 請先細閱有關「根據城市規劃條例提交及公佈申述、對申述的意見及進一步申述」的城市規劃委員會規劃指引。這份指引可向委員會秘書處(香港北角渣華道 333 號北角政府合署 15 樓 - 電話: 2231 4810 或 2231 4835 及規劃署的規劃資料查詢處(熱線: 2231 5000)(香港北角渣華道 333 號北角政府合署 17 樓及新界沙田上禾輦路 1 號沙田政府合署 14 樓)索取, 亦可從委員會的網頁下載 (網址: <http://www.info.gov.hk/tpb/>)。
- This form can be downloaded from the Board's website, and obtained from the Secretariat of the Board and the Planning Enquiry Counters of the Planning Department. The form should be typed or completed in block letters, preferably in both English and Chinese. The representation may be treated as not having been made if the required information is not provided.  
此表格可從委員會的網頁下載, 亦可向委員會秘書處及規劃署的規劃資料查詢處索取。提出申述的人士須以打印方式或以正楷填寫表格, 填寫的資料宜中英文兼備。倘若未能提供所需資料, 則委員會可把有關申述視為不曾提出論。

**1. Person Making this Representation (known as "Representer" hereafter)**  
提出此宗申述的人士 (下稱「申述人」)

Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)

張觀浩

(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
(注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

**2. Authorised Agent (if applicable) 獲授權代理人(如適用)**

Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)



(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
(注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

**3. Details of the Representation 申述詳情**

Draft plan to which the representation relates (please specify the name and number of the draft plan)  
與申述相關的草圖 (請註明草圖名稱及編號)

S/K22/URA1/1  
明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0206

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	漏水
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.  
若申述附有支持其論點的補充資料(例如彩色及/或大尺寸的圖則、規劃研究及技術評估),則須提供 90 份複本(或 40 份印文本和 50 份電子複本)。

<sup>@</sup> Please describe the particular matter in the plan to which the representation relates. Where the representation relates to an amendment to a plan, please specify the amendment item number provided in the Schedule of Proposed Amendments. 請形容圖則內與申述有關的指定事項,如申述與圖則的修訂有關,請註明在修訂項目附表內的修訂項目編號。

Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號



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	Date Received 收到日期	

- The representation should be made to the Town Planning Board (the Board) before the expiry of the specified plan exhibition period. The completed form and supporting documents (if any) should be sent to the Secretary, Town Planning Board, 15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong.  
申述必須於指定的圖則展示期限屆滿前向城市規劃委員會（下稱「委員會」）提出，填妥的表格及支持有關申述的文件（倘有），必須送交香港北角渣華道 333 號北角政府合署 15 樓城市規劃委員會秘書收。
- Please read the "Town Planning Board Guidelines on Submission and Publication of Representations, Comments on Representations and Further Representations" before you fill in this form. The Guidelines can be obtained from the Secretariat of the Board (15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong - Tel.: 2231 4810 or 2231 4835) and the Planning Enquiry Counters of the Planning Department (Hotline: 2231 5000) (17/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong and 14/F., Sha Tin Government Offices, 1 Sheung Wo Che Road, Sha Tin, New Territories), or downloaded from the Board's website at <http://www.info.gov.hk/tpb/>.  
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- This form can be downloaded from the Board's website, and obtained from the Secretariat of the Board and the Planning Enquiry Counters of the Planning Department. The form should be typed or completed in block letters, preferably in both English and Chinese. The representation may be treated as not having been made if the required information is not provided.  
此表格可從委員會的網頁下載，亦可向委員會秘書處及規劃署的規劃資料查詢處索取。提出申述的人士須以打印方式或以正楷填寫表格，填寫的資料宜中英文兼備。倘若未能提供所需資料，則委員會可把有關申述視為不曾提出論。

**1. Person Making this Representation (known as "Representer" hereafter)**  
**提出此宗申述的人士（下稱「申述人」）**

Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)

黎月圓

(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
(注意：若個人提交，須填上與香港身份證／護照所載的全名)

**2. Authorised Agent (if applicable) 獲授權代理人(如適用)**

Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation\* 先生/女士/公司/機構\*)



(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
(注意：若個人提交，須填上與香港身份證／護照所載的全名)

**3. Details of the Representation 申述詳情**

Draft plan to which the representation relates (please specify the name and number of the draft plan)  
與申述相關的草圖（請註明草圖名稱及編號）

S/K22/URA1/1  
明倫街／馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0207



3. Details of the Representation (Continued) (use separate sheet if necessary)* 申述詳情(續) (如有需要, 請另頁說明)*		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項®	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	樓宇老化, 嚴重漏水
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話, 請註明詳情。		

# If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.  
若申述附有支持其論點的補充資料(例如彩色及/或大尺寸的圖則、規劃研究及技術評估), 則須提供 90 份複本(或 40 份印文本和 50 份電子複本)。

@ Please describe the particular matter in the plan to which the representation relates. Where the representation relates to an amendment to a plan, please specify the amendment item number provided in the Schedule of Proposed Amendments. 請形容圖則內與申述有關的指定事項, 如申述與圖則的修訂有關, 請註明在修訂項目附表內的修訂項目編號。


Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號

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	Date Received 收到日期	

- The representation should be made to the Town Planning Board (the Board) before the expiry of the specified plan exhibition period. The completed form and supporting documents (if any) should be sent to the Secretary, Town Planning Board, 15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong.  
申述必須於指定的圖則展示期限屆滿前向城市規劃委員會(下稱「委員會」)提出, 填妥的表格及支持有關申述的文件(倘有), 必須送交香港北角渣華道333號北角政府合署15樓城市規劃委員會秘書收。
- Please read the "Town Planning Board Guidelines on Submission and Publication of Representations, Comments on Representations and Further Representations" before you fill in this form. The Guidelines can be obtained from the Secretariat of the Board (15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong - Tel.: 2231 4810 or 2231 4835) and the Planning Enquiry Counters of the Planning Department (Hotline: 2231 5000) (17/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong and 14/F., Sha Tin Government Offices, 1 Sheung Wo Che Road, Sha Tin, New Territories), or downloaded from the Board's website at <http://www.info.gov.hk/tpb/>.  
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- This form can be downloaded from the Board's website, and obtained from the Secretariat of the Board and the Planning Enquiry Counters of the Planning Department. The form should be typed or completed in block letters, preferably in both English and Chinese. The representation may be treated as not having been made if the required information is not provided.  
此表格可從委員會的網頁下載, 亦可向委員會秘書處及規劃署的規劃資料查詢處索取。提出申述的人士須以打印方式或以正楷填寫表格, 填寫的資料宜中英文兼備。倘若未能提供所需資料, 則委員會可把有關申述視為不曾提出論。

<b>1. Person Making this Representation (known as "Representer" hereafter)</b> 提出此宗申述的人士(下稱「申述人」)
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)  張世林
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

<b>2. Authorised Agent (if applicable) 獲授權代理人(如適用)</b>
Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation* 先生/女士/公司/機構*)  
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

<b>3. Details of the Representation 申述詳情</b>	
Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖(請註明草圖名稱及編號)	S/K22/URA1/1 明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0208

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	鋼筋掉落, 嚴重漏水.
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話, 請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.

若申述附有支持其論點的補充資料(例如彩色及/或大尺寸的圖則、規劃研究及技術評估), 則須提供 90 份複本(或 40 份印文本和 50 份電子複本)。

<sup>@</sup> Please describe the particular matter in the plan to which the representation relates. Where the representation relates to an amendment to a plan, please specify the amendment item number provided in the Schedule of Proposed Amendments. 請形容圖則內與申述有關的指定事項, 如申述與圖則的修訂有關, 請註明在修訂項目附表內的修訂項目編號。



Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號



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	Date Received 收到日期	

- The representation should be made to the Town Planning Board (the Board) before the expiry of the specified plan exhibition period. The completed form and supporting documents (if any) should be sent to the Secretary, Town Planning Board, 15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong.  
申述必須於指定的圖則展示期限屆滿前向城市規劃委員會(下稱「委員會」)提出, 填妥的表格及支持有關申述的文件(倘有), 必須送交香港北角渣華道 333 號北角政府合署 15 樓城市規劃委員會秘書收。
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<b>1. Person Making this Representation (known as "Representer" hereafter)</b> 提出此宗申述的人士(下稱「申述人」)	
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)	
	
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)	
<b>2. Authorised Agent (if applicable) 獲授權代理人(如適用)</b>	
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)	
	
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<b>3. Details of the Representation 申述詳情</b>	
Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖(請註明草圖名稱及編號)	S/K22/URA1/1 明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0209

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	天花脫落 樓齡老化
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.  
 若申述附有支持其論點的補充資料(例如彩色及/或大尺寸的圖則、規劃研究及技術評估),則須提供 90 份複本(或 40 份印文本和 50 份電子複本)。

<sup>@</sup> Please describe the particular matter in the plan to which the representation relates. Where the representation relates to an amendment to a plan, please specify the amendment item number provided in the Schedule of Proposed Amendments. 請形容圖則內與申述有關的指定事項,如申述與圖則的修訂有關,請註明在修訂項目附表內的修訂項目編號。

Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號



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	Date Received 收到日期	

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申述必須於指定的圖則展示期限屆滿前向城市規劃委員會(下稱「委員會」)提出, 填妥的表格及支持有關申述的文件(倘有), 必須送交香港北角渣華道 333 號北角政府合署 15 樓城市規劃委員會秘書處。
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**1. Person Making this Representation (known as "Representer" hereafter)**  
提出此宗申述的人士(下稱「申述人」)

Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)

李現成

(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
(注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

**2. Authorised Agent (if applicable) 獲授權代理人(如適用)**

Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation\* 先生/女士/公司/機構\*)



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**3. Details of the Representation 申述詳情**

Draft plan to which the representation relates (please specify the name and number of the draft plan)  
與申述相關的草圖(請註明草圖名稱及編號)

S/K22/URA1/1  
明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0210



3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	鋼筋外露
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

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Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號

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	Date Received 收到日期	

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**1. Person Making this Representation (known as "Representer" hereafter)**  
提出此宗申述的人士(下稱「申述人」)

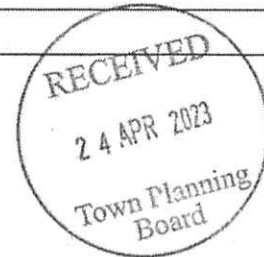
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)

張福儀

(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
(注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

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Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation\* 先生/女士/公司/機構\*)



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與申述相關的草圖(請註明草圖名稱及編號)

S/K22/URA1/1  
明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0211

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

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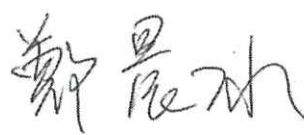
Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號



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	Date Received 收到日期	

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Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)	
	
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Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖(請註明草圖名稱及編號)	S/K22/URA1/1 明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0212

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	由於年久失修 要重漏水
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	石屎爆裂
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

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<sup>@</sup> Please describe the particular matter in the plan to which the representation relates. Where the representation relates to an amendment to a plan, please specify the amendment item number provided in the Schedule of Proposed Amendments. 請形容圖則內與申述有關的指定事項,如申述與圖則的修訂有關,請註明在修訂項目附表內的修訂項目編號。

Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號

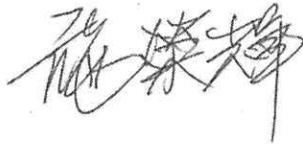


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申述必須於指定的圖則展示期限屆滿前向城市規劃委員會(下稱「委員會」)提出,填妥的表格及支持有關申述的文件(倘有),必須送交香港北角渣華道333號北角政府合署15樓城市規劃委員會秘書收。
- Please read the "Town Planning Board Guidelines on Submission and Publication of Representations, Comments on Representations and Further Representations" before you fill in this form. The Guidelines can be obtained from the Secretariat of the Board (15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong - Tel.: 2231 4810 or 2231 4835) and the Planning Enquiry Counters of the Planning Department (Hotline: 2231 5000) (17/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong and 14/F., Sha Tin Government Offices, 1 Sheung Wo Che Road, Sha Tin, New Territories), or downloaded from the Board's website at <http://www.info.gov.hk/tpb/>.  
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**1. Person Making this Representation (known as "Representer" hereafter)**  
提出此宗申述的人士(下稱「申述人」)

Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)



(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
(注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

**2. Authorised Agent (if applicable) 獲授權代理人(如適用)**

Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation\* 先生/女士/公司/機構\*)



(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
(注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

**3. Details of the Representation 申述詳情**

Draft plan to which the representation relates (please specify the name and number of the draft plan)  
與申述相關的草圖(請註明草圖名稱及編號)

S/K22/URA1/1  
明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0213



3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	衛生差
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.  
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Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號

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申述必須於指定的圖則展示期限屆滿前向城市規劃委員會(下稱「委員會」)提出, 填妥的表格及支持有關申述的文件(倘有), 必須送交香港北角渣華道 333 號北角政府合署 15 樓城市規劃委員會秘書收。
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此表格可從委員會的網頁下載, 亦可向委員會秘書處及規劃署的規劃資料查詢處索取。提出申述的人士須以打印方式或以正楷填寫表格, 填寫的資料宜中英文兼備。倘若未能提供所需資料, 則委員會可把有關申述視為不曾提出論。

<b>1. Person Making this Representation (known as "Representer" hereafter)</b> 提出此宗申述的人士(下稱「申述人」)	
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)	
	
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)	
<b>2. Authorised Agent (if applicable) 獲授權代理人(如適用)</b>	
Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation* 先生/女士/公司/機構*)	
	
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<b>3. Details of the Representation 申述詳情</b>	
Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖 (請註明草圖名稱及編號)	S/K22/URA1/1 明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0214

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	支持重建
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	支持重建
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	支持重建
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

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Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」


at the appropriate box 請在適當的方格內加上  號



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申述必須於指定的圖則展示期限屆滿前向城市規劃委員會（下稱「委員會」）提出，填妥的表格及支持有關申述的文件（倘有），必須送交香港北角渣華道333號北角政府合署15樓城市規劃委員會秘書收。
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<b>1. Person Making this Representation (known as "Representer" hereafter)</b> 提出此宗申述的人士（下稱「申述人」）
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)  
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意：若個人提交，須填上與香港身份證／護照所載的全名)

<b>2. Authorised Agent (if applicable) 獲授權代理人(如適用)</b>
Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation* 先生/女士/公司/機構*)  
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<b>3. Details of the Representation 申述詳情</b>	
Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖（請註明草圖名稱及編號）	S/K22/URA1/1 明倫街／馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0216

3. Details of the Representation (Continued) (use separate sheet if necessary)<sup>#</sup>  
 申述詳情(續)(如有需要,請另頁說明)<sup>#</sup>

Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	

Any proposed amendments to the draft plan? If yes, please specify the details.  
 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.  
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<sup>@</sup> Please describe the particular matter in the plan to which the representation relates. Where the representation relates to an amendment to a plan, please specify the amendment item number provided in the Schedule of Proposed Amendments. 請形容圖則內與申述有關的指定事項,如申述與圖則的修訂有關,請註明在修訂項目附表內的修訂項目編號。

Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號



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提出此宗申述的人士(下稱「申述人」)

Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)

連景明

(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
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**3. Details of the Representation 申述詳情**

Draft plan to which the representation relates (please specify the name and number of the draft plan)  
與申述相關的草圖(請註明草圖名稱及編號)

S/K22/URA1/1  
明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0217



3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.  
若申述附有支持其論點的補充資料(例如彩色及/或大尺寸的圖則、規劃研究及技術評估),則須提供 90 份複本(或 40 份印文本和 50 份電子複本)。



<sup>@</sup> Please describe the particular matter in the plan to which the representation relates. Where the representation relates to an amendment to a plan, please specify the amendment item number provided in the Schedule of Proposed Amendments. 請形容圖則內與申述有關的指定事項,如申述與圖則的修訂有關,請註明在修訂項目附表內的修訂項目編號。

Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號

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	Date Received 收到日期	

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申述必須於指定的圖則展示期限屆滿前向城市規劃委員會(下稱「委員會」)提出, 填妥的表格及支持有關申述的文件(倘有), 必須送交香港北角渣華道333號北角政府合署15樓城市規劃委員會秘書收。
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<b>1. Person Making this Representation (known as "Representer" hereafter)</b> 提出此宗申述的人士(下稱「申述人」)	
Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation* (先生/女士/公司/機構*))	
	
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意: 若個人提交, 須填上與香港身份證/護照所載的全名)	
<b>2. Authorised Agent (if applicable) 獲授權代理人(如適用)</b>	
Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation* (先生/女士/公司/機構*))	
	
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<b>3. Details of the Representation 申述詳情</b>	
Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖(請註明草圖名稱及編號)	S/K22/URA1/1 明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0218

**3. Details of the Representation (Continued) (use separate sheet if necessary)<sup>#</sup>**  
**申述詳情(續) (如有需要, 請另頁說明)<sup>#</sup>**

**Nature of and reasons for the representation 申述的性質及理由**

Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	

Any proposed amendments to the draft plan? If yes, please specify the details.  
 對草圖是否有任何擬議修訂? 如有的話, 請註明詳情。

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<sup>@</sup> Please describe the particular matter in the plan to which the representation relates. Where the representation relates to an amendment to a plan, please specify the amendment item number provided in the Schedule of Proposed Amendments. 請形容圖則內與申述有關的指定事項, 如申述與圖則的修訂有關, 請註明在修訂項目附表內的修訂項目編號。


Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號



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申述必須於指定的圖則展示期限屆滿前向城市規劃委員會（下稱「委員會」）提出，填妥的表格及支持有關申述的文件（倘有），必須送交香港北角渣華道 333 號北角政府合署 15 樓城市規劃委員會秘書收。
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<b>1. Person Making this Representation (known as "Representer" hereafter)</b> 提出此宗申述的人士（下稱「申述人」）	
Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation* 先生/女士/公司/機構*)  蘇偉良	
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意：若個人提交，須填上與香港身份證／護照所載的全名)	
<b>2. Authorised Agent (if applicable) 獲授權代理人(如適用)</b>	
Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation* 先生/女士/公司/機構*)  	
(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided) (注意：若個人提交，須填上與香港身份證／護照所載的全名)	
<b>3. Details of the Representation 申述詳情</b>	
Draft plan to which the representation relates (please specify the name and number of the draft plan) 與申述相關的草圖（請註明草圖名稱及編號）	S/K22/URA1/1 明倫街／馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0219

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.  
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Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號



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	Date Received 收到日期	

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**1. Person Making this Representation (known as "Representer" hereafter)**  
提出此宗申述的人士（下稱「申述人」）

Full Name 姓名 / 名稱 (Mr./ Ms./ Company/Organisation\* 先生/女士/公司/機構\*)

陳燕玲

(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
(注意：若個人提交，須填上與香港身份證／護照所載的全名)

**2. Authorised Agent (if applicable) 獲授權代理人(如適用)**

Full Name 姓名 / 名稱 (Mr./ Ms./ Company/Organisation\* 先生/女士/公司/機構\*)



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**3. Details of the Representation 申述詳情**

Draft plan to which the representation relates (please specify the name and number of the draft plan)  
與申述相關的草圖（請註明草圖名稱及編號）

S/K22/URA1/1  
明倫街／馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0220



3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

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at the appropriate box 請在適當的方格內加上  號

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	Date Received 收到日期	

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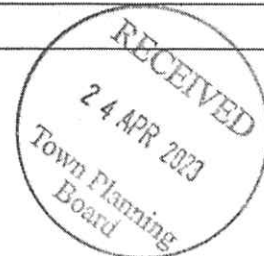
**1. Person Making this Representation (known as "Representer" hereafter)**  
**提出此宗申述的人士(下稱「申述人」)**

Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)

(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
(注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

**2. Authorised Agent (if applicable) 獲授權代理人(如適用)**

Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)



(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
(注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

**3. Details of the Representation 申述詳情**

Draft plan to which the representation relates (please specify the name and number of the draft plan)  
與申述相關的草圖(請註明草圖名稱及編號)

S/K22/URA1/1  
明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0222

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

<sup>#</sup> If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.

若申述附有支持其論點的補充資料(例如彩色及/或大尺寸的圖則、規劃研究及技術評估),則須提供 90 份複本(或 40 份印文本和 50 份電子複本)。

<sup>@</sup> Please describe the particular matter in the plan to which the representation relates. Where the representation relates to an amendment to a plan, please specify the amendment item number provided in the Schedule of Proposed Amendments. 請形容圖則內與申述有關的指定事項,如申述與圖則的修訂有關,請註明在修訂項目附表內的修訂項目編號。

Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號



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- The representation should be made to the Town Planning Board (the Board) before the expiry of the specified plan exhibition period. The completed form and supporting documents (if any) should be sent to the Secretary, Town Planning Board, 15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong.  
申述必須於指定的圖則展示期限屆滿前向城市規劃委員會(下稱「委員會」)提出, 填妥的表格及支持有關申述的文件(倘有), 必須送交香港北角渣華道333號北角政府合署15樓城市規劃委員會秘書收。
- Please read the "Town Planning Board Guidelines on Submission and Publication of Representations, Comments on Representations and Further Representations" before you fill in this form. The Guidelines can be obtained from the Secretariat of the Board (15/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong - Tel.: 2231 4810 or 2231 4835) and the Planning Enquiry Counters of the Planning Department (Hotline: 2231 5000) (17/F., North Point Government Offices, 333 Java Road, North Point, Hong Kong and 14/F., Sha Tin Government Offices, 1 Sheung Wo Che Road, Sha Tin, New Territories), or downloaded from the Board's website at <http://www.info.gov.hk/tpb/>.  
填寫此表格之前, 請先細閱有關「根據城市規劃條例提交及公佈申述、對申述的意見及進一步申述」的城市規劃委員會規劃指引。這份指引可向委員會秘書處(香港北角渣華道333號北角政府合署15樓 - 電話: 2231 4810或2231 4835及規劃署的規劃資料查詢處(熱線: 2231 5000)(香港北角渣華道333號北角政府合署17樓及新界沙田上禾輦路1號沙田政府合署14樓)索取, 亦可從委員會的網頁下載(網址: <http://www.info.gov.hk/tpb/>)。
- This form can be downloaded from the Board's website, and obtained from the Secretariat of the Board and the Planning Enquiry Counters of the Planning Department. The form should be typed or completed in block letters, preferably in both English and Chinese. The representation may be treated as not having been made if the required information is not provided.  
此表格可從委員會的網頁下載, 亦可向委員會秘書處及規劃署的規劃資料查詢處索取。提出申述的人士須以打印方式或以正楷填寫表格, 填寫的資料宜中英文兼備。倘若未能提供所需資料, 則委員會可把有關申述視為不曾提出論。

**1. Person Making this Representation (known as "Representer" hereafter)**  
提出此宗申述的人士(下稱「申述人」)

Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)

(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
(注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

**2. Authorised Agent (if applicable) 獲授權代理人(如適用)**

Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)



(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
(注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

**3. Details of the Representation 申述詳情**

Draft plan to which the representation relates (please specify the name and number of the draft plan)  
與申述相關的草圖(請註明草圖名稱及編號)

S/K22/URA1/1  
明倫街/馬頭角道

\* Delete as appropriate 請刪去不適用者  
Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0223

3. Details of the Representation (Continued) (use separate sheet if necessary)* 申述詳情(續)(如有需要,請另頁說明)#		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項@	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	牆身裂開  支持重建
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	天花長期漏水  支持重建
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	隨時倒塌  支持重建
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

# If supporting documents (e.g. colour and/or large size plans, planning studies and technical assessments) is included in the representations, 90 copies (or 40 hard copies and 50 soft copies) of such information shall be provided.  
 若申述附有支持其論點的補充資料(例如彩色及/或大尺寸的圖則、規劃研究及技術評估),則須提供 90 份複本(或 40 份印文本和 50 份電子複本)。

@ Please describe the particular matter in the plan to which the representation relates. Where the representation relates to an amendment to a plan, please specify the amendment item number provided in the Schedule of Proposed Amendments. 請形容圖則內與申述有關的指定事項,如申述與圖則的修訂有關,請註明在修訂項目附表內的修訂項目編號。

Please fill "NA" for not applicable item 請在不適用的項目填寫「不適用」

at the appropriate box 請在適當的方格內加上  號



**2. Authorised Agent (if applicable) 獲授權代理人(如適用)**

Full Name of Representative 代表全名

(Only applicable to organisation/group as the authorised agent 只適用於獲授權代理人為機構組織)

(Mr./ Ms. \* 先生/女士\*)

簡作墜 KAN CHOK KIN

(Note: full name shown on HKID Card/Passport must be provided)  
(注意:須填上香港身份證/護照所載的全名)

\* Delete as appropriate 請刪去不適用者

- # If the authorised agent is an organisation/group, must provide information of the representative  
如果代理人為機構組織，須提供其代表的資料
- @ Please refer to point no. 5 of Important Notice  
請查閱重要告示的第 5 點

**Statement on Personal Data 個人資料的聲明**

1. In accordance with the provisions of the Town Planning Ordinance and the relevant Town Planning Board Guidelines, the personal data submitted to the Board in this representation will be used by the Secretary of the Board and Government departments for the following purposes:
- the verification of identity of the "representer" and the authorised agent;
  - the processing of this representation which includes making available the name of the "representer" for public inspection when making available this representation for public inspection; and
  - facilitating communication between the "representer" and the Secretary of the Board/Government departments

城市規劃委員會就這宗申述所收到的個人資料會交給委員會秘書及政府部門，以根據《城市規劃條例》及相關的城市規劃委員會規劃指引的規定作以下用途：

- 核實「申述人」及獲授權代理人的身份；
- 處理這宗申述，包括在公布這宗申述供公眾查閱時，公布「申述人」的姓名供公眾查閱；以及
- 方便「申述人」與委員會秘書及政府部門之間進行聯絡。

2. The personal data provided by the "representer" and the authorised agent in this representation may also be disclosed to other persons for the purposes mentioned in paragraph 1 above.

「申述人」及獲授權代理人就這宗申述提供的個人資料，或亦會向其他人士披露，以作上述第 1 段提及的用途。

3. The "representer" and the authorised agent have a right of access and correction with respect to their personal data as provided under the Personal Data (Privacy) Ordinance (Cap. 486). Request for personal data access and correction should be addressed to the Secretary of the Board at 15/F, North Point Government Offices, 333 Java Road, North Point, Hong Kong.

根據《個人資料(私隱)條例》(第 486 章)的規定，「申述人」及獲授權代理人有權查閱及更正其個人資料。如欲查閱及更正其個人資料，應向委員會秘書提出有關要求，其地址為香港北角渣華道 333 號北角政府合署 15 樓。



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提出此宗申述的人士(下稱「申述人」)

Full Name 姓名 / 名稱 (Mr./Ms./Company/Organisation\* 先生/女士/公司/機構\*)

李耀榮

(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
(注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

**2. Authorised Agent (if applicable) 獲授權代理人(如適用)**

Full Name 姓名 / 名稱 (Mr./ Ms./Company/Organisation\* 先生/女士/公司/機構\*)

RECEIVED

24 APR 2023

Town Planning Board

(Note: for submission by person, full name shown on Hong Kong Identity Card/Passport must be provided)  
(注意: 若個人提交, 須填上與香港身份證/護照所載的全名)

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S/K22/URA1/1  
明倫街/馬頭角道

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Please fill in "NA" for not applicable item 請在不適用的項目填寫「不適用」

0224

3. Details of the Representation (Continued) (use separate sheet if necessary) <sup>#</sup> 申述詳情(續)(如有需要,請另頁說明) <sup>#</sup>		
Nature of and reasons for the representation 申述的性質及理由		
Subject matters 有關事項 <sup>@</sup>	Are you supporting or opposing the subject matter? 你支持還是反對有關事項?	Reasons 理由
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	天井污水長流  衛生差 有老鼠
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
	<input checked="" type="checkbox"/> support 支持 <input type="checkbox"/> oppose 反對	
Any proposed amendments to the draft plan? If yes, please specify the details. 對草圖是否有任何擬議修訂? 如有的話,請註明詳情。		

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at the appropriate box 請在適當的方格內加上  號