

Witness: Libby Bradshaw

Made: 31st August 2020

Witness Statement in relation to Glebe Way Level Crossing

PINS REF: 3226477

Witness Statement of LIBBY BRADSHAW

1. I, Libby Bradshaw, am a business owner at The Twelve Taps, 102 High Street, Whitstable
2. I live at [REDACTED], Whitstable and have lived in Whitstable for 8 years
3. I make this statement because I object to the proposed extinguishment of the Glebe Way Level Crossing.
4. I use the crossing multiple times a day. I own a business in the High Street and regularly go to and from my home and work – as well as recreational use to go to the beach and the shops. On some days I use the crossing as many as ten times.
5. There are days when the closure of the crossing could add an hour or more to my journey to and from my small business. I often have to come home late at night and would always choose to avoid the road under the railway – which feels unsafe especially at night. The same issue affects my partner who co-owns the business and between up it would have a huge impact on our lives.
6. I am prepared to attend the forthcoming inquiry to give oral evidence.

STATEMENT OF TRUTH

I believe that the facts stated in this witness statement are true.

Signed: E Bradshaw

Date: 31/08/2020

LIBBY BRADSHAW
Witness: [INSERT NAME]
Made: [INSERT DATE]

31/08/2020

Witness Statement in relation to Glebe Way Level Crossing
PINS REF: 3226477

Witness Statement of LIBBY BRADSHAW

BUSINESS OWNER
~~LIBBY BRADSHAW~~

1. I, ~~LIBBY BRADSHAW~~, am THE TWELVE TAPS LTD at 102 HIGH ST, WHITSTABLE

2. I live in [REDACTED], and have lived in [WHITSTABLE/
~~WHITSTABLE AREA~~ as appropriate] for [.8.] years.

3. I make this statement because I object to the proposed extinguishment of the Glebe Way Level Crossing.

4. **[DESCRIBE YOUR USE OF THE CROSSING].**

I use the crossing multiple times a day. I own a business on the high street and regularly go to and from home & work - as well as recreational use to go to the beach and the shops. On some days I use that crossing as many as ten times.

5. **[DESCRIBE THE EFFECT OF CLOSURE ON YOU & YOUR LIFE].**

There are days when the closure of the crossing could add an hour or more to my journey to and from my small business. I often have to come home late at night and would always choose to avoid the road under the railway bridge - which feels unsafe especially at night - the same issue affects my partner who co-owns the business and between us it would have a huge impact on our lives.

6. I am prepared to attend the forthcoming inquiry to give oral evidence.

Documents

7. **[Reference to any documents exhibited - delete if not applicable]**

STATEMENT OF TRUTH

I believe that the facts stated in this witness statement are true.

Signed: [REDACTED]

Date: 31/08/2020