

ELECTRONIC DETERMINATION	Papers circulated electronically on 24 December 2020.
Panel reference	SITE COMPATABILITY CERTIFICATE  PPS-2020HCC002 – Port Stephens – SCC_2019_PORTS_002_00  127 High St, Wallalong
Chair	Alison McCabe

	In relation to this matter, I declare that I have:				
	no known conflict of interest ☑ OR				
an $\operatorname{actual^1} \square$ , potential <sup>2</sup> $\square$ or reasonably perceived <sup>3</sup> $\square$ conflict of interest, as detailed below:					
	Amelale	Alison McCabe	12/1/2021		
	Signature	Name	Date		
	Should a conflict be declared the panel chair is to ensure appropriate management measures are in place, as determined by the chair, and countersign this form, noting any additional measures.				
	Chair Signature	Name	Date		
	Please return this form to the Planning Panels Secretariat at enquiry@planningpanels.nsw.gov.au				

<sup>&</sup>lt;sup>1</sup> An 'actual' conflict of interests is where there is a direct conflict between a member's duties and responsibilities and their private interests or other duties.

<sup>&</sup>lt;sup>2</sup> A 'potential' conflict of interests is where a panel member has a private interest or other duty that could conflict with their duties as a panel member in the future.

<sup>&</sup>lt;sup>3</sup> A 'reasonably perceived' conflict of interests is where a person could reasonably perceive that a panel member's private interests or other duties are likely to improperly influence the performance of their duties as a panel member, whether or not this is in fact the case.



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Х	no known conflict of interest $\square$ OR an actual $^1$ $\square$ , potential $^2$ $\square$ or reasonably perceived $^3$ $\square$ conflict of interest, as detailed below:							
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-								
Signat	ure	Clone 1:	) dan	Name	Clare Brown	Date	12 January 2021	
					ropriate manage ny additional me		asures are in place,	as
Chair S	Signature		Name		Date			
Please	return this	form to the F	Planning Panels	Secretariat at	enquiry@plannir	ngpanels.r	nsw.gov.au	

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9	Giacomo Arnott	12 January 2021			
Signature	Name	Date			
	panel chair is to ensure appropriate stersign this form, noting any addition	management measures are in place, as onal measures.			
Chair Signature	Name	Date			

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1/4/1	Paul Le Mottee	13/1/21			
Signature	Name	Date			
·	anel chair is to ensure appropriate tersign this form, noting any addition	management measures are in place, as onal measures.			
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