

BRIEFING DATE	21 April 2020
Panel reference	SITE COMPATIBILITY CERTIFICATE  PPS-2020HCC003 – Newcastle City Council – SCC_2019_NEWCA_001_00  40 King St, Adamstown
Chair	Juliet Grant

In relation to this matt	er, I declare that I have:	
no known confli	ct of interest $oxtimes$ OR	
an actual¹ □, po <u>NIL</u>	tential <sup>2</sup> $\square$ or reasonably per	ceived $^3$ $\square$ conflict of interest, as detailed below:
	_	
Brant	Juliet Grant	21 April 2020
Signature	Name	Date
		nsure appropriate management measures are in place, as , noting any additional measures.
Chair Signature	Name	Date
Please return this form	to the Planning Panels Secre	etariat 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.

 $<sup>^{2}</sup>$  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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no known conflict	of interest ⊠ OR				
an actual¹ □, pote	an $\operatorname{actual^1} \square$ , potential <sup>2</sup> $\square$ or reasonably perceived <sup>3</sup> $\square$ conflict of interest, as detailed below:				
Smilally	Sandra Hutton	21/4/2020			
Signature	Name	Date			
	ared the panel chair is to ensure ap and countersign this form, noting a	propriate management measures are in pla any additional measures.	ce, as		
Chair Signature	Name	Date			
Please return this form to	o the Planning Panels Secretariat at	enquiry@planningpanels.nsw.gov.au			

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Chair	Juliet Grant

In rela	ation to this matter, I dec	lare that I have:		
	no known conflict of interest ⊠ OR			
	an actual $\Box$ , potential $\Box$ or reasonably perceived $\Box$ conflict of interest, as detailed below:			
Signat		N A MACKENZIE <b>Name</b>		21/4/2020 <b>Date</b>
Sigila	ture	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	Please return this form to the Planning Panels Secretariat at <a href="mailto:enquiry@planningpanels.nsw.gov.au">enquiry@planningpanels.nsw.gov.au</a>			

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an actual¹ □, po	an $\operatorname{actual^1} \square$ , $\operatorname{potential^2} \square$ or reasonably $\operatorname{perceived^3} \square$ conflict of interest, as detailed below:			
			_ _	
			_ _	
			_	
·			_	
Alba Ohy	Marcia Doheny	23 April 2020		
Signature	Name	Date		
		ure appropriate management measures are in place, as oting any additional measures.		
Chair Signature	Name	Date		
Please return this form	to the Planning Panels Secreta	ariat at enquiry@planningpanels.nsw.gov.au		

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