

MEETING DATE	11 March 2025
Panel reference	PPSHCC-264 – Newcastle – DA2023/01154 – 237 Wharf Road, Newcastle 2300 – Residential Flat Building
Chair	Alison McCabe (Chair)

In relation to this matter,	I declare that I have:		
no known conflict	of interest ⊠ OR		
an actual¹□, pote	ntial <sup>2</sup> □ or reasonably perceived <sup>3</sup> □	conflict of interest, as detailed belo	ow:
Melale	Alison McCabe	11/03/2025	
Signature	Name	Date	
	ared the panel chair is to ensure app and countersign this form, noting a	ropriate management measures are ny additional measures.	e in place, as
twee o			
/mrale	Alison McCabe	11/03/2025	
Chair Signature	Name	Date	
Please return this form to	o the Planning Panels Secretariat at	enguiry@planningnanels nsw gov a	п

 $<sup>^{1}</sup>$  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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no known conflict of intere	est ⊠ OR	
an actual $\Box$ , potential $\Box$	or reasonably perceived³ □ conflic	t of interest, as detailed below:
A.M	John Mackenzie	11/03/2025
Signature	Name	Date
	panel chair is to ensure appropriate intersign this form, noting any addit	e management measures are in place, as ional measures.
Melele	Alison McCabe	11/03/2025
Chair Signature	Name	Date

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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Ep_			
	Roberta Ryan	11/03/2025	
Signature	Name	Date	
	red the panel chair is to ensure app and countersign this form, noting a	propriate management measures are ny additional measures.	e in place, as
Milale	Alison McCabe	11/03/2025	
Chair Signature	Name	Date	
Please return this form to	the Planning Panels Secretariat at	enquiry@planningpanels.nsw.gov.a	<u>u</u>

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an actual $^1$ $\square$ , potential $^2$ $\square$ $^2$	or reasonably perceived³ ☐ conflict	of interest, as detailed below:	
7	Stephen Leathley	11/03/2025	
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.			
Amilale	Alison McCabe	11/03/2025	

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