

ELECTRONIC DETERMINATION	Papers circulated electronically on 6 August 2024
Panel reference	PPSSCC-435 – The Hills Shire– 1431/2023/JP – 6-14 Castle Street, Castle Hill
Chair	Abigail Goldberg

In relation to this matter, I de	clare that I have:	
no known conflict of in	terest ⊠ OR	
an actual $^1\square$ , potential	<sup>2</sup> □ or reasonably perceived <sup>3</sup> □	conflict of interest, as detailed below:
Al dury	Abigail Goldberg	6 August 2024
Signature	Name	Date
	the panel chair is to ensure appr countersign this form, noting an	opriate management measures are in place, as y additional measures.
Chair Signature	Name	Date
Please return this form to the	Planning Panels Secretariat at e	nquiry@planningpanels.nsw.gov.au

 $<sup>^1</sup>$  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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9_	David Ryan	6 August 2024
Signature	Name	Date
	ne panel chair is to ensure appropriat ountersign this form, noting any addi	e management measures are in place, as tional measures.
Chair Signature	Name	Date
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			-
			=
			=
			-
Jad Hyphy	Jarrod Murphy	6 August 2024	
Signature	Name	Date	
	red the panel chair is to ensure ap and countersign this form, noting	opropriate management measures are in place, as any additional measures.	
Chair Signature	Name	Date	
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an actual¹ □, potential² □	or reasonably perceived $^3$ $\square$ confliction	ct of interest, as detailed below:
,		
J2/	Robert Buckham	6 August 2024
Signature	Name	Date
	panel chair is to ensure appropriat untersign this form, noting any addi	e management measures are in place, as tional measures.
Chair Signature	Name	Date
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##1			
Merly	Steve Murray	6 August 2024	
Signature	Name	Date	
	be declared the panel chair is to ensure e chair, and countersign this form, notin	appropriate management measures are in place, as ng any additional measures.	
Chair Signature	Name	Date	
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