

ELECTRONIC DETERMINATION	Papers circulated electronically on 8 January 2025.
Panel reference	PPSSCC-544 – City of Parramatta – DA/199/2024 - 7 Macquarie Street, Parramatta
Chair	Abigail Goldberg

In relation to this matter, I declare	tilat i ilave.	
no known conflict of interest	t ⊠ OR	
an actual $^1\square$, potential $^2\square$ o	r reasonably perceived³ □ conflict	of interest, as detailed below:
Mary	Abigail Goldberg	14 January 2025
Signature	Name	Date
Should a conflict be declared the p determined by the chair, and coun		e management measures are in place, as cional measures.

Please return this form to the Planning Panels Secretariat at $\underline{enquiry@planningpanels.nsw.gov.au}$

¹ 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.

 $^{^2}$ 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.

³ 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 interes	st 🗵 UR	
an actual \square , potential \square	or reasonably perceived $^3\square$ conflict	of interest, as detailed below:
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4		
	David Ryan	14 January 2025
Signature	Name	Date
	panel chair is to ensure appropriate ntersign this form, noting any additi	management measures are in place, as onal measures.
	, , , , , , , , , , , , , , , , , , , ,	
Chair Signature	Name	Date

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an actual¹ □, pote	ntial ² \square or reasonably perceived ³ \square confl	lict of interest, as detailed below:	
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Jalu/ordulo			
	Colin (Joe) Woodward	14 January 2025	
Signature	Name	Date	
Should a conflict be decla	Name	Date ate management measures are in place, as	
Should a conflict be decla	Name ared the panel chair is to ensure appropri	Date ate management measures are in place, as	
Should a conflict be decla	Name ared the panel chair is to ensure appropriand countersign this form, noting any ad	Date ate management measures are in place, as	

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