

MEETING DATE	31 March 2022
Panel reference	PPSSEC-171- Inner West - MOD/2021/0376 – 750 Princes Highway, Tempe – Bunnings Tempe
Chair	Carl Scully

In relation to this matter, I d	eclare that I have:		
no known conflict of in	terest 🗵 OR		
an actual $^1\square$, potential	² □ or reasonably perceived ³ □	conflict of interest, as detailed below:	
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			_
-			_
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Marly	Carl Scully	31 March 2022	
Signature	Name	Date	
	d the panel chair is to ensure a d countersign this form, noting	opropriate management measures are in place, a any additional measures.	is
Chair Signature	Name	Date	
Please return this form to th	e Planning Panels Secretariat a	t 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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Moth				
	Philipa Scott	31 March 2022		
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		
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fue f	Sue Francis	31 March 2022	
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Chair Signature	Name	Date	
enan oignature	Name		

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an $\operatorname{actual^1}\Box$, $\operatorname{potential^2}\Box$ or reasonably $\operatorname{perceived^3}\Box$ conflict of interest, as detailed below:			
Munell			
	Jan Murrell	31 March 2022	
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	

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