

ELECTRONIC DETERMINATION	Papers circulated electronically on 22 November 2023.
Panel Reference	PPSNTH-215 – Randwick – DA/395/2022 77-103 Anzac Parade KENSINGTON
Chair	Carl Scully

In relation to this ma	tter, I declare that I have:		
no known con	flict of interest $oxtimes$ OR		
an actual¹ □, ¡	potential $^2\square$ or reasonably perceived	$d^3 \square$ conflict of interest, as detailed below:	
Marly			
/	Carl Scully	30 November 2023	
Signature	Name	Date	
	declared the panel chair is to ensure nair, and countersign this form, notir	appropriate management measures are in place, ag any additional measures.	, as
Chair Signature	Name	Date	

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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Thir	Alice Spizzo	30 November 2023
Signature	Name	Date
	ct be declared the panel chair is to ensur the chair, and countersign this form, not	re appropriate management measures are in place, as ting any additional measures.
Chair Signature	. Name	Date

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an actual¹ □, potential² [□ or reasonably perceived ³ □ conf	lict of interest, as detailed below:
Q1/	Amelia Thorpe	5 December 2023
Signature	Name	Date
	e panel chair is to ensure appropria untersign this form, noting any add	ate management measures are in place, as ditional measures.
Chair Signature	Name	Date

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MMD00	Marea Wilson	30 November 2023	
Signature	Name	Date	
	the panel chair is to ensure app countersign this form, noting a	ropriate management measures ard ny additional measures.	e in place, as
Chair Signature	Name	Date	

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			-	
Jane M Cofferdy	Joanne McCafferty	30 November 2023		
Signature	Name	Date		
	ne panel chair is to ensure appro ountersign this form, noting any	opriate management measures are in place, as additional measures.		
Chair Signature	Name	Date		

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