

MEETING DATE 17 September 2020	
Panel reference PPSSEC-80 – Bayside - DA-2018/1003/C - 5 Oscar Place - Pagewood	
Chair	Carl Scully

In rela	tion to this matter, I declare	that I have:			
	no known conflict of interest $oxtimes$ OR				
	an $\operatorname{actual^1} \square$, potential ² \square or reasonably perceived ³ \square conflict of interest, as detailed below:				
f	Morly		47.5		
	,	Carl Scully	17 September 2020		
Signat	cure	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		
Please	e return this form to the Plan	ning Panels Secretariat at <u>enquiry@</u>	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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	an $\operatorname{actual^1}\Box$, $\operatorname{potential^2}\Box$ or reasonably perceived $\operatorname{actual^3}\Box$ conflict of interest, as detailed below:				
4	/				
r		Roberta Ryan	16 September 2020		
Signat	ture	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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	Name	
Mheils Signature	name	5/15 16-09-2020 Date
Signature Should a conflict be declar	name	Date Date Date management measures are in place, as
Should a conflict be declar determined by the chair, as	Name Name red the panel chair is to ensure appropriat countersign this form, noting any a	Date Date priate management measures are in place, as additional measures.
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-				
-				
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	Pleffs	PAUL P	APPAS 16	109/20
Signat	ure	Name	Date	
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