



Declaration of Interest

<b>ELECTRONIC DETERMINATION</b>	3 September 2025 / Papers circulated electronically on 27 August 2025.
<b>Panel reference</b>	<b>PPSSNH-449 – North Sydney – DA297/2023</b> 619 & 621 Pacific Highway, St Leonards, NSW, 2065
<b>Chair</b>	Peter Debnam

In relation to this matter, I declare that I have:

no known conflict of interest  OR

an actual<sup>1</sup> , potential<sup>2</sup>  or reasonably perceived<sup>3</sup>  conflict of interest, as detailed below:

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Peter Debnam

18 September 2025

**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.

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**Chair Signature**

**Name**

**Date**

Please return this form to the Planning Panels Team at [enquiry@planningpanels.nsw.gov.au](mailto:enquiry@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>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>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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<b>Chair</b>	Peter Debnam

In relation to this matter, I declare that I have:

no known conflict of interest  OR

an actual<sup>4</sup> , potential<sup>5</sup>  or reasonably perceived<sup>6</sup>  conflict of interest, as detailed below:

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Brian Kirk

18 September 2025

**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.

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**Chair Signature**

**Name**

**Date**

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