

20 November 2024

Declaration of Interest

MEETING DATE

PANEL REFERENCE	PPSSNH-504 - Ryde - LDA2024/0103 - 3 HALIFAX STREET MACQUARIE PARK				
CHAIR	Peter Debnam (Chair)				
In relation to this matter, I on known conflict of an actual 1 , potenti	interest ⊠ OR	rd ³ □ conflict of interest, as detailed below:			
Bille	Brian Kirk	20/11/2024			
Signature	Name	Date			
	d the panel chair is to ensure d countersign this form, noti	e appropriate management measures are in place, as ng any additional measures.			
Chair Signature	Name	Date			

 $^{^{1}}$ 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.



Please return this form to the Planning Panels Secretariat at enquiry@planningpanels.nsw.gov.au



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PANEL REFERENCE	PPSSNH-504 - Ryde - LDA2024/ 3 HALIFAX STREET MACQUARIE F	
CHAIR	Peter Debnam (Chair)	
In relation to this matter, I d	declare that I have:	
no known conflict of	interest ⊠ OR	
an actual¹ □, potenti	ial $^2\square$ or reasonably perceived $^3\square$ con	of interest, as detailed below:
Red Llonan	Peter Debnam (Chair)	20/11/2024
Signature	Name	Date
	d the panel chair is to ensure appropr nd countersign this form, noting any ac	riate management measures are in place, as dditional measures.
		_
Chair Signature	Name	Date

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Chair Signature

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CHAIR	Peter Debnam (Chair)		
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no known conflict of i	interest 🗵 OR		
an actual¹□, potenti	$al^2\square$ or reasonably perceived $^3\square$	conflict of interest, as detailed below:	
\wedge			
Wennis Manus	Glennis James	26/11/2024	
Signature	Name	Date	
	d the panel chair is to ensure app d countersign this form, noting a	ropriate management measures are in pl ny additional measures.	lace, as

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Name

Date

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