

MEETING DATE	3 December 2024
Panel reference	PPSSSH-161 - Sutherland Shire - DA24/0086 9 - 13 Shackel Road BANGOR 2234
Chair	Annelise Tuor

In relation to this matter, I dec	are that I have:		
no known conflict of inte	erest ⊠ OR		
an actual $^1 \square$, potential 2	☐ or reasonably perceived ³ ☐	☐ conflict of interest, as detailed below:	
			-
			-
Armaline Tron			
	Annelise Tuor	21 November 2024	
Signature	Name	Date	
Should a conflict be declared the determined by the chair, and c		propriate management measures are in place, as any additional measures.	
			_
Chair Signature	Name	 Date	
Please return this form to the F	Planning Panels Secretariat at	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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In relation to this matter,	I declare that I have:		
no known conflict o	of interest $oxtimes$ OR		
an actual¹ □, poter	itial 2 \square or reasonably perceived 3 \square 0	conflict of interest, as detailed below:	
P) Pollon	3		
	Penelope Holloway	21 November 2024	
Signature	Name	Date	
	red the panel chair is to ensure appro and countersign this form, noting an	opriate management measures are in pla y additional measures.	ace, as
Chair Signature	Name	Date	
Please return this form to	the Planning Panels Secretariat at el	nquiry@planningpanels.nsw.gov.au	

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an actual 1 \square , potential 2 \square α	or reasonably perceived $^3 \square$ conflict	of interest, as detailed below:
·		
C. Eneur	Carol Provan	21 November 2024
Signature	Name	Date
-	panel chair is to ensure appropriate attersign this form, noting any addition	management measures are in place, as onal measures.
Chair Signature	Name	Date
Please return this form to the Plar	ning Panels Secretariat at enquiry@	planningpanels.nsw.gov.au

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an actual¹ □, pote	ntial ² \square or reasonably perceived ³ \square	☐ conflict of interest, as detailed below:	
Mrr			
00	Elizelle Cilliers	22 November 2024	
Signature	Name	Date	
	ared the panel chair is to ensure ap and countersign this form, noting a	propriate management measures are in place any additional measures.	e, as
Chair Signature	Name	Date	
Please return this form to	o the Planning Panels Secretariat at	enguiry@planningpanels.nsw.gov.au	

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