

ELECTRONIC DETERMINATION	Papers circulated electronically on 4 April 2023.
Panel reference	PPSSTH-190 – Albury – DA10.2022.39717.1 421 Elizabeth Mitchell Drive THURGOONA 2640 - Trinity Anglican College
Chair	Chris Wilson (Chair)

n relation to this matter, I declare that I have:			
no known conflict of interes	no known conflict of interest $oxtimes$ OR		
an actual \square , potential \square	an actual 1 \square , potential 2 \square or reasonably perceived 3 \square conflict of interest, as detailed below:		
Q			
	Chris Wilson	12/4/2023	
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.			
Chair Signature	Name	Date	
Please 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 $\operatorname{actual^1} \square$, $\operatorname{potential^2} \square$ or reasonably perceived $\operatorname{\square}$ conflict of interest, as detailed below:			v:
G.1	1 (Mintmas	Grant Christmas	11/04/2023	
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.				
	Signature	 Name	Date	

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£	mant	Juliet Grant	12/04/2023	
Signatu	ıre	Name	Date	
		panel chair is to ensure appropriate ntersign this form, noting any additi	management measures are in place, as onal measures.	
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	David Thurley	12/04/2023	
Signature	Name	Date	
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