

ELECTRONIC DETERMINATION	Papers circulated electronically on 6 November 2020.
Panel reference	PPSSWC-107 – Penrith – DA19/0419.02 5-7 Floribunda Avenue GLENMORE PARK NSW 2745
Chair	Justin Doyle

In relation to this matte	r, I declare that I have:		
no known conflic	t of interest $oxtimes$ OR		
an actual¹□, pot	ential <sup>2</sup> □ or reasonably perceived <sup>3</sup>	□ conflict of interest, as detailed be	elow:
JADI	Justin Doyle	16/11/20	
Signature	Name	Date	
	lared the panel chair is to ensure a r, and countersign this form, noting	ppropriate management measures a any additional measures.	ire in place, as
Chair Signature	Name	Date	

Please return this form to the Planning Panels Secretariat at <a href="mailto:enquiry@planningpanels.nsw.gov.au">enquiry@planningpanels.nsw.gov.au</a>

<sup>&</sup>lt;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>&</sup>lt;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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Jen Ble	Jeni Pollard	16/11/20	
Signature	Name	Date	
	red the panel chair is to ensure ag and countersign this form, noting	opropriate management measures a any additional measures.	re in place, as
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an actual¹ □, potential² □	or reasonably perceived³ □ conflict	of interest, as detailed below:
Albary	Louise Camenzuli	16/11/20
Signature	Name	Date
	panel chair is to ensure appropriate ntersign this form, noting any additi	management measures are in place, as onal measures.
Chair Signature	Name	Date

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N.Gr			
	Nicole Gurran	16/11/20	
Signature	Name	Date	
	ed the panel chair is to ensure ap nd countersign this form, noting	propriate management measures are in p any additional measures.	lace, as
Chair Signature	Name	Date	

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Brilo	Ross Fowler	16/11/20	
Signature	Name	Date	
	e declared the panel chair is to ensure chair, and countersign this form, not	e appropriate management measures are in plac ing any additional measures.	ce, as
Chair Signature	Name	Date	

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