

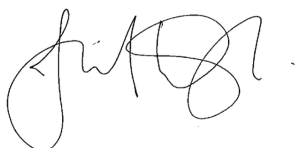
Declaration of Interest

ELECTRONIC DETERMINATION	Papers circulated electronically on 26 February 2025.
Panel reference	PPSSWC-439 - Camden - DA/2024/364/1 - 52 Park Road, Leppington
Chair	Justin Doyle

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

no known conflict of interest ☒ OR

an actual¹ ☐, potential² ☐ or reasonably perceived³ ☐ conflict of interest, as detailed below:



Justin Doyle

26 February 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.

.....

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.

Declaration of Interest

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

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Louise Camenzuli

26 February 2025

.....

.....

.....

Signature

Name

Date

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.....

.....

.....

Chair Signature

Name

Date

⁷ 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.

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David Kitto

28 February 2025

.....

Signature **Name** **Date**

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.....

.....

Chair Signature **Name** **Date**

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.....	Grant Christmas	26 February 2025
.....
Signature	Name	Date

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.....
Chair Signature	Name	Date

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.....	Mary-Lynne Taylor	5 March 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.

.....
Chair Signature	Name	Date

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