



Conflict of interest declaration

Use this form to declare real, perceived or potential conflicts of interest in relation to your potential engagement with LOCAL LAND SERVICES.

Nature of conflict: Tick all appropriate. Attach additional information if required.

- No real or perceived conflicts to declare**
- Actual** conflict of interest Conflict of **role**
- Perceived** conflict of interest **Financial** (pecuniary) interest
- Potential** conflict of interest **Non-financial** (non-pecuniary) interest

Outline the general background and details of your proposed involvement and responsibilities and how you would manage and/or avoid the perception, real or otherwise, of the conflict(s) of interest.

Declaration by applicant: I declare that the above details are correct to the best of my knowledge and I make the conflicts of interest declaration in good faith.

Name			
Address			
Phone			
Email address			
Signature		Date	

Submitting the approved form

- ➔ The Conflict of Interest declaration must be supplied as an appendix to your application for engagement with LOCAL LAND SERVICES.
- ➔ The relevant LOCAL LAND SERVICES region will advise in writing if your declaration has been approved or not.
- ➔ The declaration, once approved or not by the region will be forwarded to the Executive Manager, LOCAL LAND SERVICES Executive Support Unit for noting

Appeals process

- ➔ If there is a dispute regarding the approval or non- approval of your declaration, this will be escalated to the LOCAL LAND SERVICES Board Conflict of Interest Sub-committee for consideration/ resolution/ decision.

Page 2 Internal use only (to be completed if external applicant has declared a real, perceived, potential conflict on Page 1)

Proposed action by relevant Local Land Services contact (should be Manager/Supervisor level)

Identify any risks that the real, perceived or potential conflicts of interest are likely to have on Local Land Services or the agency’s performance of its public responsibilities. Outline what action is proposed to reduce the risk or resolve the conflict:

Name			
Position			
Email address			
Signature		Date	

Approval by regional General Manager

Approved Not approved

Reason for not approved:

Name			
Position			
Signature		Date	