

Nomination Form IHAP Community Representatives



Lifestyle and opportunity
@ your doorstep

Nomination details:

I would like to be a local community representative on the **City of Ryde Independent Hearing and Assessment Panel (IHAP)**.

I accept that selection and appointment to the IHAP will be subject to my:

- being a current resident in the local government area
- having knowledge and awareness of the local government areas and issues of concern to the local community
- being able to demonstrate my understanding of the planning process and assessment issues
- being able to represent and communicate the interests of the local community
- being able to attend the IHAP meetings and contribute constructively to the determination of applications
- being willing to adhere to the IHAP's code of conduct and operational procedures.

I have attached a supporting letter demonstrating how I meet the criteria for membership.

Signed declaration

If appointed to the Independent Hearing and Assessment Panel (IHAP), I:

- confirm that I am aware of my responsibilities as a local community representative on the **City of Ryde IHAP**
- confirm I meet the eligibility criteria for the panel
- confirm I am not a property developer or real estate agent
- agree to sign and comply with the panel's code of conduct agreement
- agree to sign a declaration of pecuniary and non-pecuniary interests, and keep this declaration up to date.

Name: _____

Contact details: _____

Address: _____

Signature and date: _____

This signed nomination form and supporting letter must be sent directly to the Acting General Manager, George Dedes by 22 November 2017 either via:

Post
Locked Bag 2069
North Ryde NSW 1670

Email
cityofryde@ryde.nsw.gov.au

Fax
9952 8070

Please do not submit forms to the Department of Planning and Environment.