

# Conflict of Interest Declaration Form



Please complete all details in this form if you believe that you may be involved in a conflict of interest situation or if you are unsure and seek to disclose a potential or perceived conflict of interest. Please refer to the Code of Conduct for guidance on conflicts of interest.

## SECTION 1: PERSONAL DETAILS

NAME: [Click here to enter text.](#)

ROLE (Mayor, Deputy Mayor, Councillor): [Click here to enter text.](#)

PHONE: [Click here to enter text.](#) EMAIL: [Click here to enter text.](#)

## SECTION 2: DISCLOSURE DETAILS

The actual, potential or perceived conflict of interest relates to: *(tick all appropriate box/s)*

- |  |   |
|--|---|
| <input type="checkbox"/> Relationship with family or friends   | <input type="checkbox"/> Relationship with external parties                   |
| <input type="checkbox"/> Outside work activities (paid/unpaid) | <input type="checkbox"/> Disposal of assets                                   |
| <input type="checkbox"/> Financial interest                    | <input type="checkbox"/> Provision of external consultancy services           |
| <input type="checkbox"/> Gifts/benefits                        | <input type="checkbox"/> Other (if you selected other please provide details) |
| <input type="checkbox"/> Provision of private services         |   |
| <input type="checkbox"/> Procurement of goods and services     |   |

The following actual, potential or perceived conflict of interest has been identified. *(please insert all relevant details)*

[Click here to enter text.](#)

The (actual, potential or perceived) conflict is expected to last: *(tick appropriate box)*

- |                                      |  |
|--------------------------------------|--|
| <input type="checkbox"/> 0–12 months | <input type="checkbox"/> >12 months or ongoing |
|--------------------------------------|--|

## SECTION 3: TO BE COMPLETED BY THE GENERAL MANAGER

In my opinion the details provided: *(tick appropriate box)*

- |  |
|--|
| <input type="checkbox"/> do not constitute a conflict of interest, and the Councillor may continue the activity (go to Section 4).                   |
| <input type="checkbox"/> do constitute an actual, potential or perceived conflict of interest (Councillor to a complete detailed action plan below). |

**If the situation does constitute a conflict of interest, please ensure that the following actions have been considered:**

- ensure all information surrounding the conflict has been disclosed and documented
- inform likely affected persons of the conflict, seeking their views where relevant as to whether they object
- reformulate the scope of work or restricting access to certain information
- recruit an independent party to oversee part or all of the process
- recommend to relinquish the interest that is causing the conflict
- temporarily remove the Councillor from the process or responsibilities
- monitor the Councillor's activities closely in relation to the conflict of interest
- take no further action because the conflict is minimal.

**I have reviewed the above considerations and the Councillor has agreed to take the following action to eliminate/manage the conflict:**

Click here to enter text.

**I will ensure this action plan is reviewed:**

Within 1 month

Within 3 months

Within 6 months

Within 12 months

Other – specify

N/A: the conflict is one-off or short duration

#### **SECTION 4: COUNCILLOR'S DECLARATION**

To the best of my knowledge and belief any actual, perceived or potential conflicts between my duties as a Councillor and my private and/or business interests have been fully disclosed in this form in accordance with the requirements of the Code of Conduct.

I acknowledge, and agree to comply with, any approach identified in this form for removing or managing an actual, perceived or potential conflict of interest.

SIGNATURE:

DATE:

#### **SECTION 5: GENERAL MANAGER TO COMPLETE**

Any actions described in the approach outlined in Section 3 have been put in place to effectively manage actual, potential or perceived conflict of interest disclosed in Section 2. The approach outlined in Section 3 ensures that the Council's public interests and reputation is adequately protected.

NAME: Click here to enter text.

SIGNATURE:

DATE: