



BRAMSHOTT & LIPHOOK NEIGHBOURHOOD DEVELOPMENT PLAN

Please print all details in the box below:

Full name:	
Address:	
Telephone:	
Mobile:	
Email address:	

The skills and expertise you could contribute to the Working Party (max 300 words)

Please turn overleaf

Please detail any national or local groups or organisation (if any) you have contact with or are involved in.

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Declaration of Interests

<u>Disclosable Pecuniary Interests</u>		
<p>Please answer all parts of this form. You must enter information in every box. If you do not have an interest in a particular question please put "NONE".</p> <p>Please provide details of:-</p>		
Disclosable Pecuniary interests	You	Spouse/Partner/Cohabitee
Employment:		
Sponsorship by 3 rd parties:		
Contracts with 3 rd Parties for services or goods relevant to the NDP:		
Land (including your home/your address):		
Licences or Options for land:		
Any Tenancy arrangements:		

Declaration:

I,, in contemplation of being a Member of the Bramshott and Liphook NEIGHBOURHOOD DEVELOPMENT PLAN Working Party give notice that I have set out my interests above.

I understand and acknowledge the following:-

- I have read, understood and agree to abide by the Bramshott and Liphook Parish Neighbourhood Development Plan Policy on Conflicts of Interest;
- I have declared anything that may be perceived as being relevant to the decisions or recommendations made by the working party. This may include membership of an organisation, ownership or interest in land or business, membership of a neighbourhood or community group relating to housing developments in Bramshott and Liphook Parish or indeed in any other matter likely to be relevant to the work undertaken by the Steering Group. This disclosure also includes the interests of a spouse or civil partner, a person with whom I am living as husband or wife or a person with whom I am living as if they were a civil partner;
- I hereby give my consent for Bramshott & Liphook Parish Council to process and retain on file information contained on this form and in accompanying documents. I understand all information will be dealt with according to data protection legislation.

Full Name of prospective Member	
Member's Signature	
Date:	
Chair's Signature:	
Date:	