APPLICATION TO THE STANDARDS COMMITTEE FOR DISPENSATION

Please note that each section MUST be completed. Please refer to the attached Guidance Notes when completing the form.

1. YOUR DETAILS						
Your full name: BARRY ALAN CHAPMAN						
Name of your Counc	Name of your Council: WHITLAND TOWN COUNCIL					
Your address and postcode: ANGOR, WEST STREET, WHITLAND. SA34 0AD						
Contact telephone number(s): 07896998813						
Email address:CHAPMANBARRY@YAHOO.CO.UK						
2. DETAILS OF YOU	ID INTEREST					
2. DETAILS OF TOU	JR IN LEKES I					
What is the matter u						
WHITLAND TOWN	WHITLAND TOWN HALL					
What is your interest	t in the above matter?					
CURRENTLY A MEMBER OF TOWN HALL COMMITTEE						
When will the above	matter be considered?					
OCCASIONAL REQUEST FOR FINANCIAL REQUEST						
Are you applying for dispensation to:						
Speak only:	Speak and vote:					
Make written	Exercise Executive					
Representations	Powers					
B. GROUNDS FOR DISPENSATION						



Regulations issued by the National Assembly for Wales prescribe the circumstances in which the Standards Committee may grant a dispensation. These grounds for granting a dispensation are summarised below and are set out in full in the attached guidance notes. On which of the following grounds do you believe that a dispensation should be granted in this case? Please tick the appropriate box(es).

•	at least half of the members considering the business has an interest	
•	my inability to participate would upset the political balance of the meeting to such an extent that the outcome would be likely to be affected;	
	my participation would not damage public confidence	×
•	the interest is common to me and a significant proportion of the general public;	X
•	my participation in the business is justified by my particular role or expertise;	×
•	the business is to be considered by an overview and scrutiny committee and my interest is not a pecuniary interest;	
•	the business relates to the finances or property of a voluntary organisation of whose management committee or board I am a member and I have no other interest	×
•	it is appropriate to do so in all the circumstances where not otherwise possible to make reasonable adjustments to accommodate a person's disability	

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4. INFORMATION IN SUPPORT OF YOUR APPLICATION							
Please set out below the reasons why you consider that the Standards Committee should grant a dispensation in this case: (Please note that failure to complete this section will result in the application form being							
returned to you)							
Occasionally matters arise that bring Whitland Town onto the agenda. In these instances dispensation requested is for speak only. On occasions where monetary assistance is requested declaration of interest will prevail and no voting can be made.							



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(please continue o	n a separate sheet if r	necessary)					
I confirm that the in	formation provided on	this form is to	ue to the heat of	knowledge Learne			
I confirm that the information provided on this form is true to the best of my knowledge. I agree that this application and all the information contained within it may form part of a public report to							
the Standarde Com	mille Itilo(III80)	in Contrained W	iu iiri it may torm pa	rt of a public report to			
THE STANDARDS COM	mittee. I request a dis	pensation in r	espect of the above	matter.			
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Signed: Bha	pno	Date:	15 10516				

Please return this form to the Monitoring Officer, Chief Executive's Department, Carmarthenshire County Council, County Hall, Carmarthen, SA31 1JP.

