

APPLICANT INFORMATION (PLEASE PRINT)				
LAST NAME:	FIRST NAME:		MIDDLE NAME:	
RESIDENTIAL STREET ADDRESS:			CITY/TOWN AND POSTAL CODE	
MAILING ADDRESS OR P. O. BOX (IF DIFFERENT FROM RESIDENTIAL ADDRESS):			CITY/TOWN AND POSTAL CODE	
IF YOU ARE A NON-RESIDENT PROPERTY ELECTOR - PROVIDE THE FULL ADDRESS OF REAL PROPERTY IN RELATION TO WHICH YOU				
ARE VOTING:				
ELECTORAL AREA:	PHONE NUMBER:	EMAIL A	EMAIL ADDRESS:	
В				

DECLARATION - By signing and submitting this application I declare that I am:

- 18 years of age or older on general voting day (February 13, 2016); and
- a Canadian citizen; and
- a resident of the electoral area noted above for at least the past 30 days <u>OR</u> a registered owner of real property in the electoral area noted above for at least the past 30 days; and
- a resident of BC for at least the past 6 months; and
- not disqualified by any enactment from voting in the assent voting or otherwise disqualified by law.

I further declare that I am entitled to vote by mail for the following reason(s) (check all that apply):

- □ I have a physical disability, illness or injury that affects my ability to vote at another voting opportunity for this assent voting; and/or
- □ I expect to be absent from the Regional District of Nanaimo on general voting day (February 13, 2016) and at the times of all advance voting opportunities (February 3 and 10, 2016); and /or
- □ I am a resident of DeCourcy Island or Mudge Island which have been designated as remote from voting places.

I request you to provide me a mail ballot package as follows (check only one):

- □ Mail it to my residential address; or
- □ Mail it to the following address:

_____; or

- $\hfill\square$ Keep it at the Office of the Regional District of Nanaimo for me to pick up; or
- □ Keep it at the Office of the Regional District of Nanaimo for ______ to pick up on my behalf.

SHADED AREA FOR COMPLETION BY STAFF ONLY				
Method of Mail Ballot Request:				
Date of Mail Ballot Request:	, 201_			
Registered Resident Elector: Yes □ No □				
Registered Non-Resident Elector: Yes □ No □				
Date Mail Ballot Issued:	, 201_			
Date Mail Ballot returned to Chief Election Officer:	, 201_			
Mail Ballot returned by: D Mail D Courier D Third Party D In Person D Other				
Mail Ballot ACCEPTED Mail Ballot REJECTED				
Reasons for rejection:				
Date (month/day/year) Chief Election Officer	or Designate			

PLEASE NOTE

Upon receipt and approval of your request, the Regional District of Nanaimo will send you a mail ballot package as soon as they are available (tentatively January 4, 2016) or advise you that they are ready to be picked up.

If we receive your application after February 5, 2016, time may not permit mailing, so you should arrange to pick up a package from the Regional District of Nanaimo.

To be counted, you are responsible for ensuring that your completed mail ballot is received at the Regional District of Nanaimo no later than 8:00 pm on General Voting Day, Saturday, February 13, 2016.

For more information contact the RDN Chief Election Officer at 250-390-4111 or 1-877-607-4111 or email vote@rdn.bc.ca