



MAIL BALLOT APPLICATION

APPLICANT INFORMATION (*required field)

Form with fields for Last Name, First Name, Middle Initial, Residential Street Address, Apt. No., City/Town, Mailing Address, Postal Code, Date of Birth, and Last 6 digits of Social Insurance Number.

REASON(S) FOR REQUEST (check all that apply)

- Checkboxes for reasons: physical disability, residence on mainland, living on island, absent from district, or other (specify).

ELECTOR REGISTRATION

I acknowledge that this application must be accompanied by an application to register as a resident elector or non-resident property elector.

MAIL BALLOT PACKAGE

- I request that my mail ballot package:
- be sent to my mailing address by regular post;
- be held at the Regional District office for pick-up;
- be sent to the below alternate address by regular post:

Please include the following ballots in my mail ballot package:

DECLARATION

- By signing and submitting this application I declare that:
1. I am a Canadian citizen;
2. I am currently, or will be 18 years of age or older on October 26, 2019;
3. I am and have been a resident of British Columbia for the past 6 months immediately before today;
4. I am and have been a resident of the above noted voting jurisdiction for at least 30 days immediately before today;
OR
I am and have been the registered owner of real property within the above voting jurisdiction for at least 30 days immediately before today;
5. I am not disqualified by the Local Government Act or any other enactment or law from voting in an election in British Columbia, and am not otherwise disqualified from voting;
6. The information provided herein is accurate and complete to the best of my knowledge.

Signed _____ Dated _____

Submit application to: Chief Election Officer, Strathcona Regional District
#301 – 990 Cedar Street, Campbell River, BC V9W 7Z8
Fax: (250) 830-6710 Email: elections@srd.ca



APPLICATION FOR REGISTRATION AS A RESIDENT ELECTOR

Form 2-6

READ THESE INSTRUCTIONS CAREFULLY BEFORE COMPLETING THE APPLICATION FORM

PERSONAL INFORMATION

- Print applicant's surname and given names in full
- Print *either* the last 6 digits of the applicant's social insurance number *or* the applicant's birthdate. This information is required pursuant to the *Local Government Act*

RESIDENTIAL ADDRESS

- Print applicant's residential address, including street number and name, city/town and postal code

MAILING ADDRESS

- Print mailing address if different from the residential address

PREVIOUS ADDRESS OR NAME

- Complete this section if the applicant's name has changed since previously registering as a resident elector

SIGNATURES

- Applicant must declare that he or she meets all the requirements listed in this section to register as a resident elector
- Applicants must sign the application form in the presence of a witness
- The witness to the applicant's signature must sign the application form
- Print residential address of the witness. Not required if the witness is an election official

ELECTION OFFICIAL USE

- 2 pieces of identification (at least one with a signature) to prove both residency and identity are required.
- If the person *does not* have documentation showing residency, 2 pieces of identification (at least one with a signature) are still required and the person must make a solemn declaration as to their place of residence.
- The type of identification documents provided (not the numbers or other information on the documents) must be printed here.



APPLICATION FOR REGISTRATION AS A RESIDENT ELECTOR

Form 2-6

PRINT IN BLOCK LETTERS USING INK

* MANDATORY INFORMATION UNDER THE LOCAL GOVERNMENT ACT

PERSONAL INFORMATION*					
LAST NAME			FIRST NAME(S)		
BIRTH DATE	YEAR	MONTH	DAY	OR	SOCIAL INSURANCE NUMBER <small>(LAST 6 NUMBERS ONLY)</small>
					X X X

(IF NO BIRTHDATE PROVIDED, YOU MAY NOT BE REGISTERED AS A PROVINCIAL VOTER)

RESIDENTIAL ADDRESS*			
APT/UNIT/PAD #	HOUSE/BUILDING #	STREET NAME	
ST/AVE/RD ETC.	N/SE/W/SW ETC.	CITY/TOWN	POSTAL CODE
		B.C.	

MAILING ADDRESS* (if different from your residential address)	
POSTAL ADDRESS	RR#
	POSTAL CODE
	B.C.

PREVIOUS ADDRESS OR NAME (if you've moved or changed your name since you last voted)		
PREVIOUS LAST NAME	PREVIOUS RESIDENTIAL ADDRESS	
PREVIOUS FIRST NAME(S)	CITY/TOWN	POSTAL CODE
	B.C.	

BY SUBMITTING THIS FORM, YOU ARE DECLARING THAT YOU MEET THE FOLLOWING REQUIREMENTS TO BE REGISTERED AS A RESIDENT ELECTOR:

- you are a Canadian citizen;
- you have been a resident in B.C. for the past 6 months;
- you have been a resident in the voting jurisdiction for the past 30 days;
- you are age 18 or older or, you will be turning 18 on or before general voting day for the next election; and
- you are not disqualified by any enactment from voting in an election or otherwise disqualified by law.

SIGNATURES		
SIGNATURE OF APPLICANT	SIGNATURE OF WITNESS	DATE
	RESIDENTIAL ADDRESS OR <input checked="" type="checkbox"/> IF WITNESSED BY AN ELECTION OFFICIAL	
<p>WARNING: Making a false statement under the <i>Election Act</i> and the <i>Local Government Act</i> is a serious offence.</p>		

ELECTION OFFICIAL USE ONLY	
<p>The <i>Local Government Act</i> requires applicants registering at the time of voting to produce two documents as evidence of their identity and place of residence, at least one of which must include the applicant's signature. The applicant may make a solemn declaration as to the applicant's place of residence if documentary evidence is not available.</p>	IDENTIFICATION 1
	IDENTIFICATION 2 / AND <input checked="" type="checkbox"/> IF SOLEMN DECLARATION MADE

This form will be provided to Elections BC when completed for purposes of updating the provincial list of resident electors. Access to the voters list is restricted under the *Election Act* to protect the privacy rights of individuals.