

FORM EL15

Application to Amend Voters' List *Municipal Elections Act, 1996 (s.17, s.24, s.25)* Form EL15

- Check only one **add** applicant's name to list
 correct applicant's information on list
 delete applicant's or family member's name from list (deceased moved other)

Name of applicant		date of birth		
_____	_____	____	____	____
last	first	middle		

Qualifying address on voting day		<input type="checkbox"/> commercial property	At qualifying address, applicant is:	
_____	_____	_____	_____	_____
street number & name	apt. #	roll number	ward number	voting subdiv.
_____	_____	(if house apartment, indicate floor level - e.g. basement, 1st floor, etc.)		
city	postal code			
		<input type="checkbox"/> owner <i>since</i> _____		
		<input type="checkbox"/> tenant <i>since</i> _____		
		<input type="checkbox"/> other <i>since</i> _____		
		<input type="checkbox"/> spouse <input type="checkbox"/> or s.s.p. date _____		
		<input type="checkbox"/> unqualified (deleted name only)		

Previous qualifying address (if applicable)		At previous address, applicant was:	
_____	_____	_____	_____
street number & name	apt. #	roll number	ward number
_____	_____	(if house apartment, indicate floor level - e.g. basement, 1st floor, etc.)	
city	postal code		
		<input type="checkbox"/> owner	
		<input type="checkbox"/> tenant	
		<input type="checkbox"/> other	
		<input type="checkbox"/> spouse <input type="checkbox"/> or s.s.p.	

Current mailing address of applicant (if different than Qualifying address above)		At mailing address, applicant is:	
_____	_____	_____	_____
street number & name	apt. / unit #	city	postal code
		<input type="checkbox"/> owner	
		<input type="checkbox"/> tenant	
		<input type="checkbox"/> other	
		<input type="checkbox"/> spouse <input type="checkbox"/> or s.s.p.	

s.s.p. = same sex partner

School Support

- Applicant is Roman Catholic (includes Greek & Ukrainian Catholics)
 Applicant has French Language Education Rights

Applicant wishes to be an elector for the following school board

- English-Public (anyone can support English-public)
 English-Separate (must be Roman Catholic)
 French-Public (must have French Language Education Rights)
 French-Separate (must be Roman Catholic & have French Language Education Rights)

I, the undersigned, hereby declare that I am a Canadian citizen, that I have attained the age of eighteen (18) on or before Voting Day, and that on Voting Day, I am entitled to be an elector in accordance with the facts or information submitted on this form, and that I understand the effect thereof. I hereby apply to have my name included or amendments made on the Voters' List in accordance with such facts or information.

signature of applicant

date

This information is collected under authority of s.17, s.24 and s.25 of the Municipal Elections Act and s.15 and s.16 of the Assessment Act and will be used to determine voter eligibility.

Certificate of Approval (to be completed by Clerk or designate)

Approved

I hereby certify that the Voters' List for said voting subdivision in this municipality shall be amended in accordance with the statement of facts or information contained herein.

Refused (state reason)

signature of clerk or designate

date