Application to vote by post

Only one person can apply to vote by post using this form

Please write in black ink and use BLOCK LETTERS.

1 About you

Surname

First name(s) (in full)

Your address (where you are registered to vote)

Telephone no (optional)

Email address (optional)

Providing an email and telephone number gives a quick and easy way to contact you about your application.

2 How long do you want a postal vote for?

I want to vote by post (tick one box only):

☐ until further notice (permanent postal vote)

☐ for the elections/referendums to be held on

D D M M Y Y Y Y

☐ for the period

from D D M M Y Y Y Y

to D D M M Y Y Y Y

3 Address for ballot paper (If different to your registration address)

Please send my ballot paper to (address):

Postcode

The reason I'd like my ballot paper sent to this address, rather than my registered address is:

4 Your date of birth and declaration

Declaration: As far as I know, the details on this form are true and accurate.

I understand that to provide false information on this form is an offence, punishable on conviction by imprisonment of up to two years and/or a fine.

Date of birth: Please write your date of birth in the boxes below using black ink

D D M M Y Y Y Y

Signature: Sign below using black ink, keeping within the grey border.

If you are unable to sign this form, please contact your electoral registration office.

5 Date of application

Today's date D D M M Y Y Y Y