



## DISTRICT OF SECHELT APPLICATION TO VOTE BY MAIL

**PLEASE PRINT**

- Instructions:**
1. Complete this form and hand-deliver, email, mail or fax it to the District of Sechelt, Corporate Services Department, 2<sup>nd</sup> Floor, 5797 Cowrie Street, PO Box 129, Sechelt, BC V0N 3A0 – Fax: 604-885-7591 – email: [elections@sechelt.ca](mailto:elections@sechelt.ca)
  2. If your application is filled out correctly, the District will send you a mail ballot package on or about October 1<sup>st</sup>, 2018. (Please note that the District will send mail ballot packages by regular mail. Excerpt from Canada Post website, 'The delivery standard for regular mail sent inside Canada is: Two business days for local mail, Three business days within the province, Four days for national mail. These time frames are not guaranteed, as weather and mail volume can affect delivery.') )
  3. You are responsible for ensuring that your completed ballot is received by the Chief Election Officer no later than 8:00pm on General Voting Day, Saturday, October 20, 2018.
  4. For more information, phone the Chief Election Officer at 604-885-1986 or email [elections@sechelt.ca](mailto:elections@sechelt.ca) or visit our website at [www.sechelt.ca](http://www.sechelt.ca).

I, \_\_\_\_\_,  
*NAME OF ELECTOR*

of \_\_\_\_\_,  
*RESIDENTIAL ADDRESS OF ELECTOR*

and \_\_\_\_\_,  
*(FOR NON-RESIDENT PROPERTY ELECTORS) ADDRESS OF REAL PROPERTY IN RELATION TO WHICH ELECTOR IS VOTING*

request that I receive a ballot to vote by mail, under the provisions of Section 110 of the Local Government Act, in the General Local Election to be held on Saturday, October 20, 2018. I hereby declare that I am:

- 18 years of age or older on October 20, 2018; **AND**
- a Canadian citizen; **AND**
- a resident of the District of Sechelt for at least the past 30 days OR a non-resident owner of real property in the District of Sechelt for at least the past 30 days; **AND**
- a resident of British Columbia for at least the past 6 months; **AND**
- not disqualified by law from voting in an election.

I further declare that I am entitled to vote by mail for the following reason(s) (**check at least one**):

- I have a physical disability, illness or injury that affects my ability to vote at another voting opportunity for this election; **AND/OR**
- I expect to be absent from the District at the times of all advance voting opportunities (October 10 and October 16) and on General Voting Day (October 20)

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

- keep it at the District office for me to pick up; **OR**
- mail it to my residential address; **OR**
- mail it to the following address: \_\_\_\_\_

\_\_\_\_\_  
*SIGNATURE OF ELECTOR*

\_\_\_\_\_  
*DATE*