

TOWNSHIP OF SOUTH FRONTENAC

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

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

Name of applicant	date of birth	year	month	day
last	First	middle		

Qualifying address on voting day commercial property At qualifying address, applicant is:

street number & name	apt. #	roll number	ward number	voting subdiv.	<input type="checkbox"/> owner <i>since</i> _____ <input type="checkbox"/> tenant <i>since</i> _____ <input type="checkbox"/> other <i>since</i> _____ date <input type="checkbox"/> spouse _____ <input type="checkbox"/> unqualified(delete name only)
city	postal code	(if house apartment, indicate floor leve e.g. basement, 1 st floor etc.)			

Previous qualifying address (if applicable) At qualifying address, applicant is:

street number & name	apt. #	roll number	ward number	voting subdiv.	<input type="checkbox"/> owner <input type="checkbox"/> tenant <input type="checkbox"/> other <input type="checkbox"/> spouse
city	postal code	(if house apartment, indicate floor leve e.g. basement, 1 st floor etc.)			

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
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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 corrected 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.

<p>Certificate of Approval (to be completed by Clerk or designate)</p> <p><input type="checkbox"/> Approved</p> <p>I hereby certify that the Voter's List for said voting subdivision in this municipality shall be amended in accordance with the statement of facts or information contained herein.</p> <p>_____ Signature of clerk or delegate</p>	<p><input type="checkbox"/> Refused (state reason)</p> <p>_____</p> <p>_____</p> <p>_____</p>
<p>_____ Date</p>	