



DISTRICT OF PORT HARDY APPLICATION TO VOTE BY MAIL

Instructions:

- a) Complete this form and deliver by hand, mail, fax or email to the District of Port Hardy Office:
- Mail: PO Box 68, 7360 Columbia St., Port Hardy, BC V0N 2P0
Hand: 7360 Columbia St., Port Hardy, BC, V0N 2P0
Fax: 250-949-7433
Email: elections@porthardy.ca
- b) If your application is filled out correctly, the District of Port Hardy will send you a mail ballot package as soon as possible. Electors wishing to vote by mail ballot are reminded of constraints such as delays in mailing, may not result in receipt of a mail ballot package on time and therefore, may request to arrange pick up from the District Office.
- c) You are responsible for ensuring your completed application to vote by mail ballot is received by the Chief Election Officer before 4:00 pm on Thursday, October 13, 2022 at the District of Port Hardy Office, 7360 Columbia Street.
- d) You are responsible for ensuring your completed ballot is received by the Chief Election Officer before:
- a) 4:30 pm, Friday, October 14, 2022, **OR**
b) Between 8:00 am and 8:00 pm on General Voting Day, Saturday October 15, 2022 at the District of Port Hardy Office, 7360 Columbia Street.
- Ballots must be received no later than 8:00 p.m. on General Voting Day, October 15, 2022 to be counted.**
- e) If you have any questions please contact the Chief Election Officer, Ross Blackwell at 250-949-6665 or email rblackwell@porthardy.ca.

PLEASE PRINT

I, _____,
NAME OF ELECTOR

Of _____,
RESIDENTIAL ADDRESS OF ELECTOR INCLUDING POSTAL CODE

And _____,
(FOR NON-RESIDENT PROPERTY ELECTORS) ADDRESS OF REAL PROPERTY IN RELATION TO WHICH ELECTOR IS VOTING

And _____,
TELEPHONE NUMBER

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 15, 2022. I hereby declare that I am:

- 18 years of age or older on October 15, 2022; **AND**
- a Canadian citizen; **AND**
- a resident of the District of Port Hardy OR a non-resident owner of real property in the District of Port Hardy for at least the past 30 days; **AND**
- a resident of BC for at least the past 6 months; **AND**
- not disqualified by law from voting in an election.

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

- mail it to my residential address; **OR**
- mail it to the following address _____; **OR**
- keep it at the District of Port Hardy Office for me to pick up; **OR**
- keep it at the District of Port Hardy Office for a third party to pick up on my behalf.
- The third party is: _____ (*Must be 18 years of age*)

SIGNATURE OF ELECTOR

WITNESS

DATE

ADDRESS OF WITNESS