MERRICKVILLE-WOLFORD
Jewel of the Rideau

Form EL15

VILLAGE OF MERRICKVILLE-WOLFORD
Application to Amend Voters' List

Municipal Elections Act, 1996 (s.17, s.24)

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

street number & name apt. # roll number ward number voting subdiv.

city postal code (if house apartment, indicate floor leve e.g. basement, 1st floor etc.)

At qualifying address, applicant is:

- ☐ owner *since*_____
- ☐ tenant *since*_____
- ☐ other *since* _____ date
- ☐ spouse _____
- ☐ unqualified(delete name only)

Previous qualifying address (if applicable)

street number & name apt. # roll number ward number voting subdiv.

city postal code (if house apartment, indicate floor leve e.g. basement, 1st floor etc.)

At qualifying address, applicant is:

- ☐ owner
- ☐ tenant
- ☐ other
- ☐ spouse

Current mailing address of applicant (if different than **Qualifying address** above)

street number & name apt. /unit # city postal code

At mailing address, applicant is:

- ☐ owner
- ☐ tenant
- ☐ other
- ☐ spouse

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.

Certificate of Approval (to be completed by Clerk or designate)	
☐ Approved 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. _____ _____ Signature of Clerk or delegate Date	☐ Refused (state reason) _____ _____ _____