

Application to Amend Voters' List
Municipal Election Act, 1996 (s.17, s.24, s.25)



Township of Central Frontenac

For Election Officials Use Only

Check one

- Add applicant's information to voters' list (if applicable)
 Correct applicant's information on voters' list
 Delete applicant's information on voters' list
 Ward _____
 Ward _____
 Ward _____
 Previous Ward _____
 deceased
 moved
 other

SECTION 1: APPLICANT INFORMATION

Last Name	Date of Birth		
	Year	Month	Day
First Name	Middle Name		

Previous Name (if you changed your name since the last municipal election)		
Last Name	First Name	Middle Name

Qualifying Address (Roll Number: _____)		
Number	Street	Unit
City, Municipality or Town		Postal Code
At qualifying address applicant is:		
<input type="checkbox"/> owner	<input type="checkbox"/> spouse	<input type="checkbox"/> tenant <input type="checkbox"/> other

Mailing Address (Same as above <input type="checkbox"/>)		
Number	Street	Unit
City, Municipality or Town		Postal Code

Previous Qualifying Address (If you moved since the last municipal election)		
Number	Street	Unit
City, Municipality or Town		Postal Code
At previous address applicant was:		
<input type="checkbox"/> owner	<input type="checkbox"/> spouse	<input type="checkbox"/> tenant <input type="checkbox"/> other

School Support change Yes No (if yes, please indicate below)

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)
 French–Public (must have French Language Education Rights)
 English–Separate (must be Roman Catholic)
 French–Separate (must be Roman Catholic & have French Language Education Rights)

SECTION 2: DECLARATION

PLEASE READ: 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 included or amendments made on the Voters' List in accordance with such facts or information.

Signature of applicant
Date
Phone Number

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. Questions about this collection may be directed to the Clerk's Office, 1084 Eilizabeth Street, Sharbot Lake, Ontario, K0H

SECTION 3: CERTIFICATE OF APPROVAL (completed by Clerk/Designate/Registration Clerk/Deputy Returning Officer)

<input type="checkbox"/> Approved I hereby certify that the Voters' List for said voting subdivision in this municipality shall be amended in accordance with the statement of facts or information contained herein.	<input type="checkbox"/> Refused (state reason) _____ _____ _____
_____ Signature of clerk or designate, etc.	_____ Date