



# Municipality of Callander - Municipal Election

## APPLICATION TO AMEND THE VOTERS' LIST

to

**ADD applicant's name to list** (Meets eligibility requirements but not on list)

**CORRECT applicant's information on list**

New address in this Municipality  Change, correct or delete name  Change school board

[\*required information] (This information is collected under authority of the Municipal Elections Act)

\*Applicants' Name \_\_\_\_\_  
(Last, First, Middle)

Previous Name if applicable \_\_\_\_\_

\*Date of Birth (YYYY/MM/DD) \_\_\_\_\_

\*Qualifying Address on Voting Day: (Street #, Street Name, Unit (or legal desc), City, Prov., Postal Code)  
\_\_\_\_\_, Callander, ON P0H 1H0

ROLL NUMBER: 4966 000 \_\_\_\_\_

\*At the qualifying address the applicant is:  Owner  Tenant  Spouse  Other resident

Mailing Address (if different from qualifying address): \_\_\_\_\_

Previous qualifying address if applicable \_\_\_\_\_

ROLL NUMBER: 4966 000 \_\_\_\_\_

### \*SCHOOL BOARD SUPPORT: Applicant's designated school board support

- ENGLISH PUBLIC (any school board elector can support English Public)
- ENGLISH SEPARATE (must be Roman Catholic [as defined by the Education Act] )
- FRENCH PUBLIC (must have French Language Education Rights)
- FRENCH SEPARATE (must have French Language Education Rights and be Roman Catholic)

### \*DECLARATION OF APPLICANT

I hereby declare that I am a Canadian citizen and that as of Voting Day, I am/will be at least 18 years old and I am/will be an eligible voter with respect to the property information provided above, and request that the Voters' List be amended to correct my information or add it to the List.

OR

I hereby declare that I am the person whose name appears above and request that my name and information be removed from the Voters' List.

**I understand that it is an offence under the Municipal Elections Act to make a false declaration.**

\*Signature \_\_\_\_\_ Date \_\_\_\_\_

### DECLARATION OF AGENT (only if filed by an Agent)

I hereby declare that the applicant has signed this application that he/she has appointed me as his/her agent to file this application on his/her behalf.

Agent's Name: \_\_\_\_\_ Signature \_\_\_\_\_

Agent's Address: \_\_\_\_\_

### CONFIRMATION OF APPROVAL OR REFUSAL – TO BE COMPLETED ONLY BY THE CLERK OR DESIGNATE

Approved: I am satisfied that the applicant is eligible to vote in Callander and I hereby approve this application. **OR**

Refused: (reason) \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name \_\_\_\_\_  Clerk  Designate