



MUNICIPALITY OF MISSISSIPPI MILLS

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)

							Year	Month	Day
Name of Applicant				Date of Birth					
Last			First			Middle			
Qualifying address on Voting Day						Commercial property			
Street Number and Name			Roll Number			Ward Number		Voting Subsidy	
City				Postal Code					
At qualifying address, applicant is (check one)									
							Date		
<input type="checkbox"/>	Owner								
<input type="checkbox"/>	Tenant								
<input type="checkbox"/>	Other								
<input type="checkbox"/>	Spouse								
<input type="checkbox"/>	Unqualified (delete name only)								
Previous Qualifying address (if applicable)									
Street Number and Name			Roll Number			Ward Number		Voting Subsidy	
City				Postal Code					
At qualifying address, applicant is (check one)									
<input type="checkbox"/>	Owner						<input type="checkbox"/>	Tenant	
<input type="checkbox"/>	Tenant						<input type="checkbox"/>	Spouse	
Current mailing address (if different that Qualifying Address)									
Street Number and Name			Apt/ Unit Number			City		Postal Code	
At mailing address, applicant is (check one)									
<input type="checkbox"/>	Owner						<input type="checkbox"/>	Tenant	
<input type="checkbox"/>	Tenant						<input type="checkbox"/>	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)

