

# Application Form to Vote by Post

Please complete in **BLACK INK and BLOCK CAPITALS** and return to Electoral Services, Kettering Borough Council, Bowling Green Road, Kettering, NN15 7QX. If you need help filling in this form please phone 01536 534353 or 01536 534200.

## Address where you are registered to vote

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## About you

First name(s) (in full)

\_\_\_\_\_

Surname

\_\_\_\_\_

Title (Mr, Mrs, Ms, Miss, Dr, Other)

\_\_\_\_\_

## Your Date of Birth

Day		Month		Year	

## Declaration

As far as I know, the details on this form are true and accurate. (You can be fined for making a false statement on this form.)

**Signature:** Keep within the border and use **BLACK INK.**

I cannot supply a signature because

\_\_\_\_\_

**Date:**

\_\_\_\_\_

## Postal vote for which elections

- All elections you are entitled to vote at
- Local elections
- Parliamentary or Assembly elections

## For how long do you want a postal vote?

- Until further notice
- For election(s) on
- |     |  |       |  |      |  |
|-----|--|-------|--|------|--|
|     |  |       |  |      |  |
| Day |  | Month |  | Year |  |
- For election(s) until
- |     |  |       |  |      |  |
|-----|--|-------|--|------|--|
|     |  |       |  |      |  |
| Day |  | Month |  | Year |  |

## Address for postal ballot paper(s)

My address where I'm registered to vote

or

The following address

\_\_\_\_\_

\_\_\_\_\_

Reason for sending ballot paper(s) to an alternative address

\_\_\_\_\_

\_\_\_\_\_

## Have you had help completing this form?

Name and Address of helper

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Printed and published by the Electoral Registration Officer, Kettering Borough Council