

Established 1793  
Incorporated  
Wolford 1850  
Merrickville 1860  
Amalgamated 1998



Telephone (613) 269-4791  
Facsimile (613) 269-3095

VILLAGE OF MERRICKVILLE-WOLFORD

# **Municipal Election 2014**

## **Public Information Session Internet, Telephone and Paper ballot voting**

**Wednesday, October 15, 2014  
7:00 to 9:00 p.m.**

**Merrickville Community Centre**

**Municipal election information help-line  
8:30 a.m. to 4:30 p.m. Monday to Friday**

**Telephone: 613-682-1014**

**Email: [electionhelp@merrickville-wolford.ca](mailto:electionhelp@merrickville-wolford.ca)**

**Voter's list:** If you are not sure that your name is on the Voter's list, you can check, **in person**, at the municipal office. Names can be added to the list up to Election Day at the office. Please see reverse for a blank form; one form per person; each person signs their own form; bring one piece of photo ID with you when you visit the municipal office.

# Application to Amend Voters' List Municipal Elections Act, 1996 (s.17, s.24, s.25) Form EL15

- Check only one  add applicant's name to list  
 correct applicant's information on list  
 delete applicant's or family member's name from list ( deceased  moved  other)

Name of applicant \_\_\_\_\_ date of birth 

year	month	day

last first middle

Qualifying address on voting day  commercial property At qualifying address, applicant is:

\_\_\_\_\_  owner since \_\_\_\_\_  
 street number & name apt. # roll number ward voting  tenant since \_\_\_\_\_  
 number subdiv.  other since \_\_\_\_\_  
 city postal code (if house apartment, indicate floor level - e.g. basement, 1st floor, etc.)  spouse  or s.s.p. date  
 unqualified (deleted name only)

Previous qualifying address (if applicable) At previous address, applicant was:

\_\_\_\_\_  owner  
 street number & name apt. # roll number ward voting  tenant  
 number subdiv.  other  
 city postal code (if house apartment, indicate floor level - e.g. basement, 1st floor, etc.)  spouse  or s.s.p.

Current mailing address of applicant (if different than Qualifying address above) At mailing address, applicant is:

\_\_\_\_\_  owner  
 street number & name apt. / unit # city postal code  tenant  
 other  
 spouse  or s.s.p.

## School Support

- Applicant is Roman Catholic (includes Greek & Ukrainian Catholics)  
 Applicant has French Language Education Rights

s.s.p. = same sex partner

## 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 included or amendments made 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)  Refused (state reason)

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.

\_\_\_\_\_  
signature of clerk or designate date