Form EL15

TOWNSHIP OF SOUTH GLENGARRY

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

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 / Date

Name of applicant date of birth

last | First | middle

Qualifying address on voting day ☐ Commercial propery

At qualifying address, applicant is:

street number & name | apt. # | roll number | ward number | voting subdiv.

☐ Owner Since:
☐ Tenant Since:
☐ Other Since:
☐ Spouse:
☐ Unqualified (delete name only)

City | postal code (if house apartment, indicate floor leve e.g. basement, 1st floor etc.)

Previous qualifying address (if applicable)

At qualifying address, applicant is:

street number & name | apt. # | roll number | ward number | voting subdiv.

☐ Owner
☐ Tenant
☐ Other
☐ Spouse

City/Province | postal code (if house apartment, indicate floor leve e.g. basement, 1st floor etc.)

Current mailing address of applicant (if different than **Qualifying address** above)

At mailing address, applicant is:

street number & name | apt. /unit # | City/Province | postal code

☐ Owner
☐ Tenant
☐ Other
☐ 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)