

# NI Assembly Election to be held on 2 March 2017

## Application to vote by post or proxy

If you are unable to go to your polling station to vote at the election on 2 March, you can use this form to apply to vote by post or appoint a proxy to vote on your behalf. Please read these notes carefully before completing the form. If you have any questions please phone the Electoral Office Helpline on 0800 4320 712.

**The deadline for the receipt of completed applications is 5.00pm on Friday 10 February 2017.**

### Completing the application form

**1** Complete your personal details. The information you provide and your signature will be compared with the information previously given on your registration form to check that they correspond.

**2** Provide the reason for the application. Indicate where you expect to be on polling day and why you cannot reasonably be expected to vote in person at your polling station, for example "I will be away on holiday in (enter the precise location). I leave on (give date of departure) and return on (give date of return)."

If the application is because of illness provide full details of that illness.

**Please ensure you provide sufficient detail to support your application or your application may be refused.**

**3** Sign the form to verify that the information provided is correct.

**4** Choose to vote by post or proxy.

**Voting by post.** Tick the box if you want your ballot paper sent to you at your registered address given at Section 1. If you want your ballot papers to be sent to a different address than your registered address, you must provide a reason for this. Postal votes will be issued two weeks before the election. If you will not be at home from then until 2 March, you should appoint a proxy.

Note: If you apply to vote by post and your application is approved you will **not** be able to vote at a polling station unless you cancel your postal vote – the deadline for cancelling a postal vote is 5.00pm on Friday 10 February 2017.

**5** **Voting by proxy.** If you want someone else to vote on your behalf you must appoint him/her and give his/her details. Your proxy must be aged 18 or over and a British, Irish, European or Commonwealth citizen.

A person can only vote as proxy for close relatives and up to two other people at the election. Your proxy can go to your polling station to vote, or they can apply to vote by post (please contact our Helpline).

**6** Have the form attested to verify that the reason you have given for requiring a postal or proxy vote is correct. **If your application is not attested it will be refused.**

**If the reason is illness, Declaration A must be completed** by either a registered medical practitioner (i.e. a doctor), a registered nurse or a Christian Science practitioner. That person must be listed on the electoral register and have treated the applicant in connection with the illness or provided care to them.

**For any other reason, Declaration B must be completed** by someone who:

- (a) is aged 18 or over;
- (b) resides in the United Kingdom;
- (c) knows you but is not related to you (i.e. not your spouse, civil partner, parent, grandparent, brother, sister, child or grandchild);
- (d) has not attested more than one other application for this election.

### Returning the form

Return the completed form to your local Area Electoral Office **by 5.00pm on 10 February**. A list of offices can be found on our website or contact the Helpline who will provide the address (details below).

If you are sending the form by post you must ensure that the correct postage is applied to the envelope. First class post does not guarantee next day delivery and if it is close to the deadline you may wish to hand deliver the application to the Area Office to ensure it is received before the deadline.

### More information

You can contact us in one of the following ways:

Helpline: 0800 4320 712  
Email: [info@eoni.org.uk](mailto:info@eoni.org.uk)  
Website: [www.eoni.org.uk](http://www.eoni.org.uk)

# NI Assembly Election to be held on 2 March 2017

## Application to vote by post or proxy

Please read the notes carefully before filling in this form.  
Please write in black ink and use BLOCK LETTERS.

**Making a false statement on this form is a criminal offence.**

### 1 About you

Surname

First Name

Middle Name(s)

Address where you are currently registered in Northern Ireland:

Post Code

Date of Birth  /  /

National Insurance No.

Tick this box if you have never had a National Insurance Number

Telephone Number (in case of query)

### 2 Reason for this application

I cannot reasonably be expected to vote in person at my polling station **on 2 March 2017** because:

**If on holiday/business please provide exact dates and locations or your application may be refused.**

### 3 Signature

You must sign this form in the box below.

**No one else can sign it for you. The signature must correspond with the signature on your most recent registration form or your application will be refused.**

Signature

Date

### FOR OFFICE USE ONLY

WARD	DATE

### 4 Application to vote by post

Tick this box if you wish to vote by post and you want the ballot paper sent to the address at Section 1.

If you wish to receive the ballot paper at a different address complete the following section. You must provide a reason for this. The address must be in the UK.

Address

Post Code

Reason why postal vote is to be sent to a different address:

### 5 Application to vote by proxy

I wish to appoint the following person to act as my proxy. I confirm that I have consulted this person and he/she is willing and able to be appointed to vote on my behalf.

Surname

First Name(s)

Address

Post Code

Proxy's relationship to you (if any):

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**6** Attestation – This section must be completed by another person who can attest that the information you have given is correct. Please see note 6 for guidance about which declaration to complete and who can complete it. **If your application is not attested it will be refused.**

### Declaration A

This must be completed where the applicant has stated in Section 2 that they are unable to vote in person at their polling station due to **illness**.

I, (full name of attestor)

certify that:

I am registered as an elector.

I am treating or giving care to (give applicant's name)

in connection with the illness specified in Section 2.

To the best of my knowledge and belief the applicant is suffering from the illness specified in Section 2, is likely to be suffering from it on 2 March and, because of it, cannot reasonably be expected to vote in person at his/her polling station.

My address

Post Code

Qualification (e.g. doctor/nurse)

Telephone No. (in case of query)

Signature

### Declaration B

This must be completed where the applicant has stated in Section 2 that they are unable to vote in person at their polling station for **any reason other than illness**.

I, (full name of attestor)

certify that:

I am aged 18 or over.

I reside in the United Kingdom.

I know (give applicant's name)

but am not his/her spouse, civil partner, parent, grandparent, brother, sister, child or grandchild.

I have not attested more than one other application for this election. To the best of my knowledge and belief the information in Section 2 is true.

My address

Post Code

Telephone No. (in case of query)

Signature

### FOR OFFICE USE ONLY

If a 'No' box is ticked initial the relevant section(s) and pass to a supervisor. If all 'Yes' boxes are ticked sign and date the form.

Name as register

Yes

No

Address as register

Yes

No

DOB corresponds

Yes

No

NINO corresponds

Yes

No

Valid reason for absent vote

Yes

No

Applicant signature corresponds

Yes

No

Attestation completed

Yes

No

Qualification of attestor (if applicable)

Yes

No

#### POSTAL VOTE APPLICATION ONLY

Address for postal vote in UK and if not registered address reason given (if applicable)

Yes

No

Signature

Date