

Application Form to Vote by Post

Only one person can apply to vote by post using this form. Make sure you complete every section and sign the form yourself. Please complete in **BLACK INK and BLOCK CAPITALS** and return to Electoral Services, The Council House, Corporation Street, Derby, DE1 2FS. If you wish to scan and email this form go to postalvoting@derby.gov.uk if you need help filling in this form please phone **01332 640837**

Address where you are registered to vote

Postal vote for which elections

You will be given a postal vote for all elections you are entitled to vote at.

If you want a postal vote for local elections only or parliamentary elections only please notify electoral services in writing.

About you

First name(s) (in full)

Surname

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

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

For office use only

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:

