



Application to Vote by Post

Electoral Services Unit Telephone 0161 234 3145
 Room 134 Textphone 0161 234 3378
 Town Hall Fax 0161 234 3075
 Manchester Web <http://www.manchester.gov.uk>
 M60 2LA email esu@manchester.gov.uk

Address:

First names

Surname or family name

I wish to vote by post (Tick ONE box only)

Until further notice

or

Only at the elections to be held on: / /

or

Only at elections during the period: / / to / /

At which types of elections would you like a postal vote? (Tick ONE box only)

All elections

or

Only local elections

or

Only parliamentary elections

I want my ballot paper to be sent to: (Tick ONE box only)

My address where I am registered (as above)

or

The following address: I require this redirection because:

.....

.....

Declaration: As far as I know, the details on this form are true and accurate.
 (You must provide your date of birth, but if you are unable to sign please see over).

Your Date of Birth: Please enter your date of birth in the boxes below in a DD MM YYYY format, writing clearly **within the borders** of the boxes, using a **black pen**.

Your Signature: Please sign your normal signature within the box below, **without crossing the shaded grey area**, using a **black pen**.

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Today's Date:/...../20.....

Your contact details (optional)

Telephone:.....

Email:.....

Office use only	PD	Elec No	Recd	On Screen	Initial
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How to Apply for an Exemption from Providing a Signature

Under s.14(1)(c) of the Electoral Administration Act 2006, the Electoral Registration officer may dispense with the requirement for postal vote applicants to provide a signature if he or she is satisfied that the applicant is unable:-

- a) To provide a signature because of any disability the applicant has;
- b) To provide a signature because the applicant is unable to read or write;
- c) To sign in a consistent and distinctive way because of any such disability or inability.

To apply for an exemption please ensure that either Section A or Section B below is completed. If anyone has assisted you to complete this form his or her name and address must also be provided.

NOTE: It is an offence to provide false information to an Electoral Registration Officer in connection with an application for a postal or proxy vote.

SECTION A

I cannot provide a signature or a consistent signature because I am disabled.

Declaration: To the best of my knowledge and belief the elector named on the front of this form is unable to provide a signature or consistent signature owing to a disability

Name of person assisting the elector:.....

Address of person assisting the elector:.....

.....Postcode.....

Signature of person assisting the elector.....

DateContact No. (optional).....

SECTION B

I cannot provide a signature or a consistent signature because I am unable to read or write.

Declaration: To the best of my knowledge and belief the elector named on the front of this form is unable to provide a signature or consistent signature owing to an inability to read or write.

Name of person assisting the elector:.....

Address of person assisting the elector:.....

.....Postcode.....

Signature of person assisting the elector.....

DateContact No. (optional).....

Please return this form to the Electoral Services Unit (the address is at the top of the page overleaf).

Remember the elector must provide their date of birth on the front of this form.