

# Wiltshire Electoral Services

# Application to Vote by Post

Please complete in **BLACK INK** and return to Electoral Services, Wiltshire Council, County Hall, Bythesea Road, Trowbridge, Wiltshire BA14 8JN. If you need help filling in this form please phone 0300 456 0112.

## Address where you are registered to vote

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## About you

First name(s) (in full)

\_\_\_\_\_

Surname

\_\_\_\_\_

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

## 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:** (must be signed by the elector only) Keep within the border and use **BLACK INK**.

I cannot supply a signature because of:

- disability
- inability to write

**Date:**

**Tel No (optional):**

\_\_\_\_\_

## Postal vote for which elections

All elections/referendums you are entitled to vote at

If you require a postal vote for a specific election type, ie Local only or Parliamentary Only, please contact Electoral Registration

## For how long do you want a postal vote?

Until further notice

For election(s)/referendum on

Day Month Year

For election(s)/referendum 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