

Application Form to Vote by Proxy (for a Particular Election)

Please complete in **BLACK INK and BLOCK CAPITALS** and return to Electoral Services, Council Offices, Argyle Road, Sevenoaks, Kent, TN13 1HG. If you need help filling in this form please phone **01732 227000**.

Address where you are registered to vote

Who do you want to vote on your behalf?

Name (in full)

Address

Relationship to you (if any)

About you

First name(s) (in full)

Surname

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

At which election(s) or referendum(s) do you want a proxy vote?

I want to vote by proxy at all election(s) and referendum(s) held on:

Day

Month

Year

Your Date of Birth

Day

Month

Year

Why do you want a proxy vote?

Your Declaration

As far as I know, the details on this form are true and accurate. I have asked the person named above who is willing and able to vote for me as my proxy. (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:

Contact Details (optional)

Telephone:

Email:

Proxy's Declaration (optional)

I am capable and willing to be appointed to vote as the applicant's proxy

Signature:

Date:

For office use only