Application Form to Vote by Post

Please complete in BLACK INK and BLOCK CAPITALS and return to Electoral Services Office, 52 Derby Street, Ormskirk, West Lancashire, L39 2DF. If you need help filling in this form please phone 01695 585018.

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

Postal vote for which elections

All elections you are entitled to vote at

Local elections

Parliamentary elections

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

I cannot supply a signature because

Date:

For office use only