

APPLICANT INFORMATION (PLEASE PRINT)		
LAST NAME:	FIRST NAME:	MIDDLE NAME:
RESIDENTIAL STREET ADDRESS:		CITY/TOWN AND POSTAL CODE
MAILING ADDRESS OR P. O. BOX (IF DIFFERENT FROM RESIDENTIAL ADDRESS):		CITY/TOWN AND POSTAL CODE
IF YOU ARE A <u>NON-RESIDENT</u> PROPERTY ELECTOR – PROVIDE THE FULL ADDRESS OF REAL PROPERTY IN RELATION TO WHICH YOU ARE VOTING:		
ELECTORAL AREA:	PHONE NUMBER:	EMAIL ADDRESS:

DECLARATION - By signing and submitting this application I DECLARE THAT I AM:

- 18 years of age or older on general voting day (October 25, 2025); and
- a Canadian citizen; and
- a resident of British Columbia for at least 6 months immediately before the day of registration; and
- a resident of Electoral Area F of the Regional District of Nanaimo; OR
a non-resident owner of real property in Electoral Area F of the Regional District of Nanaimo for at least 30 days immediately before the day of registration; and
- not disqualified under any enactment from voting in an election or otherwise disqualified by law.

I request you to provide me a mail ballot package as follows (check only one):

- ☐ Mail it to my residential address; or
- ☐ Mail it to the following address: _____; or
- ☐ Courier it at my expense to the following address (*contact our office to make arrangements*): _____; or
- ☐ Keep it at the office of the Regional District of Nanaimo for me to pick up; or
- ☐ Keep it at the office of the Regional District of Nanaimo for an authorized person to pick up on my behalf. The name of the authorized person is: _____.

SIGNATURE OF ELECTOR

(typed name or digital signature is acceptable if filling in electronically)

DATE

SHADED AREA FOR COMPLETION BY STAFF ONLY

Method of Mail Ballot Request: ☐ Mail ☐ Email ☐ Phone ☐ Fax ☐ In Person ☐ Other

Date of Mail Ballot Request: _____, 2025

Registered Resident Elector: Yes ☐ No ☐

Registered Non-Resident Elector: Yes ☐ No ☐

Date Mail Ballot Issued: _____, 2025

Date Mail Ballot returned to Chief
Election Officer: _____, 2025

Mail Ballot returned by: ☐ Mail ☐ Courier ☐ Third Party ☐ In Person ☐ Other

☐ Mail Ballot ACCEPTED

☐ Mail Ballot REJECTED

Reason(s) for rejection: _____

Date (month/day/year)

Chief Election Officer or Designate

PLEASE NOTE

Upon receipt and approval of your request, the Regional District of Nanaimo will send you a mail ballot package or advise you that they are ready to be picked up as soon as possible after Monday, September 22, 2025.

If you are applying to vote by mail after October 13, 2025, time may not permit mailing, so you should arrange to pick up a package from the Regional District of Nanaimo at the address below. Applications will not be accepted after 4:30 p.m., October 23, 2025.

To be counted, you are responsible for ensuring that your completed ballot is received no later than 8:00 p.m. on General Voting Day, Saturday, October 25, 2025, at the office of the Regional District of Nanaimo, 6300 Hammond Bay Road, Nanaimo, BC V9T 6N2.

For more information contact the Chief Election Officer or designate at 250-390-4111 or 1-877-607-4111 or email vote@rdn.bc.ca.

RETURN COMPLETED FORM to: Attn: Chief Election Officer
Regional District of Nanaimo
6300 Hammond Bay Road, Nanaimo, BC V9T 6N2
Fax: 250-390-4163 or by Email: vote@rdn.bc.ca

Freedom of Information and Protection of Privacy Act Notice

Personal information contained on this form is collected under the Freedom of Information and Protection of Privacy Act sections 26(a) and 26(c) and will be used only for the purpose of the mail ballot voting process for the 2025 assent vote (referendum) pursuant to the Local Government Act section 110. If you have any questions about the collection and use of this information, please contact the Chief Election Officer, Regional District of Nanaimo, by phone at 250-390-4111 or 1-877-607-4111, or email at vote@rdn.bc.ca.