

REPRESENTATION OF THE PEOPLE ACTS

FOR OFFICE USE	
Polling District	Elector No.
Prop. Ref	

Application to vote by emergency proxy

A separate application form is required for each person. If more forms are needed, please photocopy it or contact us at the addresses shown overleaf or on Freefone 0800 393783. Please use BLOCK LETTERS.

1 About you

Surname

First name(s) (in full)

Your address (where you are registered to vote)

Postcode

You do not have to give the following information but it will help us to contact you if there is a query about your form.

Daytime telephone or mobile number

E-mail address

2 At which election do you want a proxy vote?

I want to vote by proxy at the election(s) held on:

Date grid with D, M, Y labels

3 Why do you want a proxy vote?

I cannot vote in person at this election due to the following physical incapacity:

Text input lines for physical incapacity

4 When did you become physically incapacitated?

Time

Date grid with D, M, Y labels

5 Support for this application

Read the notes to see who can support this application. Please ask the person who is supporting your application to give their name, address and position.

Supporter's full name

Supporter's address

Postcode

Supporter's position or professional qualification

6 Supporter's declaration, signature and date

To the best of my knowledge and belief, the applicant is suffering from the physical incapacity given in the application and is not able to go to the polling station on election day or vote there unaided.

The applicant was physically incapacitated on:

Date grid with D, M, Y labels

Signature

Date grid with D, M, Y labels

If you need assistance with this form please call the helpline on FREEPHONE 0800 393783

P.T.O.

Application to vote by emergency proxy

7 About your proxy

Full name

Relationship to you (if any)

Full address

Postcode

8 Your date of birth and signature

You must sign the form yourself. If the form is not signed, it will be sent back to you.

I have asked the person I have named as my proxy and confirm that he/she is willing and able to be appointed to vote on my behalf.

Declaration: As far as I know, the details on this form are true and accurate. I understand that to provide false information on this form is an offence, punishable on conviction by imprisonment of up to 6 months and/or a fine.

Date of birth: Using the order 'DD MM YYYY' enter your date of birth in the boxes below, **using black ink.**

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Signature: Please sign in the box below **using black ink**, keeping within the grey border

9 Date of Application

Today's date

		D			M				Y

Notes on voting by emergency proxy

How do I apply to vote by proxy?

- 1 You must ask your proxy if they are willing to vote on your behalf.
- 2 Fill in the proxy vote application form.
- 3 You must give a reason why you need to vote by proxy.
- 4 You must get a **qualified** person to sign your application.
- 5 Make sure that **you** sign the form. Your proxy can also sign the form if they want, but they do not have to.

Voting by proxy

If you have had a medical emergency that took place 6 days before an election or less, you can apply to vote by emergency proxy (someone else voting on your behalf). You can apply up until 5pm on election day, but, you must already be registered.

Who can support my application?

- A registered medical practitioner
- A registered nurse
- A Christian Science practitioner
- If you live in a residential care home, the person registered as running that home
- If you live in a residential accommodation provided by a local authority, the matron or other person in charge of that accommodation
- If you live on premises provided for people of pensionable age or people with physical disabilities, the warden of those premises

How to return this form

Please return this form to any of the Electoral Registration Offices shown below. Faxed applications or applications scanned and sent as e-mail attachments are also acceptable, subject always to the constraints of the technology. Fax lines in particular can be extremely busy as the deadline approaches.

The Electoral Registration Officer:

Moray House,
16-18 Bank Street,
INVERNESS
IV1 1QY

Council Buildings,
Ferry Road,
DINGWALL
IV15 9QR

3A Bridge Street,
WICK,
Caithness
KW1 4AG

42 Point Street,
STORNOWAY,
Isle of Lewis
HS1 2XF

Tel 01463 703311
Fax 01463 703301

01349 863260
01349 865942

01955 602251
01955 603982

01851 706262
01851 706843

e-mail: ero@highland.gov.uk

What happens after I've returned this form

- Your proxy must go to **your** polling station to vote on your behalf
- You must tell your proxy how you want them to vote on your behalf, for example, which candidate or which party
- Your local electoral registration office will tell your proxy when and where to vote on your behalf.

Supply of your date of birth and signature

- You will need to give your date of birth and signature on this application form. This information is needed to prevent fraud. If you are unable to sign this form, please contact your Electoral Registration Officer.