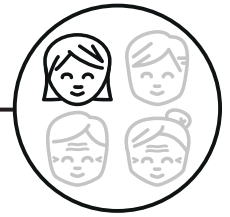


# POWER OF ATTORNEY FOR REGISTRATION on the list of electors or the referendum list and APPLICATION TO VOTE BY MAIL



Designation of the person to register onto the list among the co-owners of a immovable or the co-occupants of a business establishment

## 1 REGISTRATION CONTEXT

- Undivided co-owners of a immovable  
 Co-occupants of a business establishment
- ▶ Since  Year  Month  Day

### Address of the immovable or business establishment

Number and name of roadway Municipality Postal code

This power of attorney concerns the list of electors and the referendum list of the municipality, as well as the list of electors of the RCM, if applicable.

## 2 PERSON\* DESIGNATED FOR REGISTRATION ON THE LIST OF ELECTORS OR THE REFERENDUM LIST

First name Last name Date of birth Year Month Day

Telephone number E-mail

### Domiciliary address

Number and name of roadway Apt. Municipality Postal code

\*This person must be of legal age and a Canadian citizen. He or she must not have lost their election rights. The person must not be entitled to have his or her name registered on the list of electors or the referendum list in a higher-ranking capacity than that of the co-owner of the building or co-occupant of a business establishment.

## 3 SIGNATURE OF THE CO-OWNERS OR CO-OCCUPANTS

Signatories must be electors or qualified voters. Most co-owners or co-occupants must sign. If there are only two co-owners or co-occupants, **both parties must sign.**

| First and last names | Signature | Date |
|----------------------|-----------|------|
|                      |           |      |
|                      |           |      |
|                      |           |      |
|                      |           |      |

This power of attorney shall remain valid until withdrawn or replaced.

Please return the form to the office of the returning officer of the municipality concerned.

**BE CAREFUL!** To vote by mail, you must complete the application on the back of the form.

#### 4 APPLICATION TO VOTE BY MAIL

As the designated\* co-owner or co-occupant, I hereby apply to vote by mail.

\_\_\_\_\_  
First name

\_\_\_\_\_  
Last name

\_\_\_\_\_  
Signature

Date

\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_|  
Year Month Day

\*This must be the person designated for entry on the list of electors or the referendum list on the front of this document or on an existing power of attorney.

**This application to vote by mail will remain valid until withdrawn or replaced, or until the municipality cancels voting by mail.**