

Application for the Register of Absentee Electors (F1600)

This document contains two (2) pages. Please make sure you fill and print both pages.

Copies of proof of name that clearly display your name must be included with this application. For details regarding accepted proof of name, refer to the Application for the Register of Absentee Electors Guide. Once your application has been approved, you can only vote by Special Ballot.

When completing this form, please print clearly. All fields are mandatory unless otherwise specified.

Section 1: Applicant Information

Contact Information:

Last Name: _____

First Name: _____

Middle Name: _____ Date of Birth (YYYY/MM/DD): _____

Phone: _____ Number: _____ Fax Number (optional): _____

E-mail: _____

Last Place of Residence in Ontario:

Street Number: _____ Street Name: _____

Unit Number: _____ City or Municipality: _____

Province: _____ Country: _____ Postal Code: _____

Date you left Ontario: _____ Date you intend to return to Ontario: _____
(YYYY/MM/DD) (if known) (YYYY/MM/DD)

Initials: _____

Once printed, please initial this page and continue to page 2.

Mailing Address (Special Ballot will be mailed here): (Please note that post office box address are not accepted)

Street Number: _____ Street Name: _____

Unit Number: _____ City, Municipality, Village: _____

Province, Territory, State or District: _____

Country: _____ Postal / Zip Code: _____

I request that my name not be shared with:

- The Permanent Register of Electors in Ontario The National Register of Electors
 Municipal Property Assessment Corporation for Municipal Elector list purposes

Section 2: Declaration

I solemnly declare that I am a Canadian Citizen, will be 18 years of age on polling day, have not already voted in this election **and**

I intend to return to Ontario _____

- I ceased to reside in Ontario within two years before polling day
- I resided in Ontario for at least 12 consecutive months before my departure, **and**
- I intend to reside in Ontario again

OR

I am an exception to the two year limitation _____

- A.** I am on active military duty as a member of the armed forces of Canada
 B. I am in the service of the Government of Canada or Ontario
 C. I attend an educational institution
 D. I am a family member of one of the above **A** **B** **C**

I make this solemn declaration conscientiously believing the information in this application to be true and knowing that it is of the same force and effect as made under oath.

Signature: _____

Date: _____

For Elections Ontario use only

ED Name: _____

Poll No. : _____

Proof of name verified

Name and Signature of Authorized Election Official: _____

Date: _____