

# APPLICATION FOR POSTAL VOTE AND FOR WAIVER OF THE REQUIREMENT FOR A SIGNATURE

Only ONE person per form please. If more forms are required or if you need help filling in this form, please telephone (0131) 344 2500.

Please write in BLACK INK and use BLOCK LETTERS

**1. YOUR ADDRESS** (The address where you are registered to vote)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

or the following address

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**2. ABOUT YOU**

First name(s) (in full)

Surname

Daytime or mobile telephone and e-mail  
(in case of query only)

\_\_\_\_\_

\_\_\_\_\_

**3. FOR HOW LONG DO YOU WANT A POSTAL VOTE?**

(a) Until further notice

(b) For election(s) on the following date

Day			Month				Year								

(c) For elections between the following dates

**From**

Day			Month				Year								

**Until**

Day			Month				Year								

**4. POSTAL VOTE FOR WHICH ELECTIONS?**

All elections you are entitled to vote at

Local elections

Parliamentary elections

**5. ADDRESS FOR POSTAL BALLOT PAPER(S)**

My address where I am registered to vote in Part 1

Reason for sending the ballot paper(s) to an alternative address

\_\_\_\_\_

\_\_\_\_\_

**6. RETURN OF FORM**

If you are unable to provide a signature, or you are unable to sign in a consistent or distinctive way because of any disability, or you are unable to read or write, the registration officer, in these circumstances, may grant you a waiver, which will mean you will not be required to provide a signature. However, you will still be required to give your date of birth.

**As far as I know, the details on this form are true and accurate.**

*You can be fined for making a false statement on this form.*

**Date of Birth (eg 02 05 1965)**

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**D D M M Y Y Y Y**

**Please state reason for Waiver requirement**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name of person assisting you (PLEASE PRINT)

Address of person assisting you

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature of person assisting you

Dated / /

\_\_\_\_\_

\_\_\_\_\_

# HELPFUL INFORMATION

This is a legal document and your vote may depend on it.

## **PART 1 – ADDRESS WHERE YOU ARE REGISTERED TO VOTE**

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Please give the address where you are registered (**not the address of the Polling Place**). If you wish to check if you are registered please contact the helpline given on the form.

## **PART 2 – ABOUT YOU**

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Please enter your name and contact details. Contact details are optional but are helpful if we need to contact you regarding your application. They will not be used or supplied for any other purpose.

## **PART 3 – FOR HOW LONG DO YOU WANT A POSTAL VOTE?**

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Your application to vote by post can be for an indefinite period, a particular election or a particular period. Please indicate your choice.

## **PART 4 – POSTAL VOTE FOR WHICH ELECTIONS?**

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For all elections tick the first box.

## **PART 5 – ADDRESS FOR POSTAL BALLOT PAPER(S)**

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Please tick the box if you wish your ballot papers to be sent to the address you are registered to vote in Part 1.

If you will be away from home, then you can choose to have your ballot papers sent to an address other than the one shown in Part 1. In this instance you must state a reason.

## **PART 6 – RETURN OF FORM**

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Please give your date of birth where requested and state the reason the waiver is required.

The person assisting you should provide their name and address, then sign and date the form.

**Applications for a postal vote must be received NO LATER than 5.00pm on the ELEVENTH working day before an election.**

When an election or referendum is going to be held, your ballot paper will be sent to you in the post. Please be aware this may be around 7 days before the poll.

## **PRIVACY STATEMENT**

We collect information under the legal basis of a task carried out in the public interest, as set out in the Representation of the People Act 1983 and related regulations. We will look after personal information securely and follow data protection legislation.

If you opted-out of the open register we will only use the information you give us for electoral purposes, including matching it against other sources of data to support the electoral register. We will not give personal information to anyone else, unless we have to by law. The law requires us to share your information with candidates, political parties and campaigners for democratic engagement purposes and credit reference agencies to check your identity when you apply for credit.

If you have not opted-out of the open register your name and address can be bought by anyone and used for lots of purposes, including direct marketing.

The Electoral Registration Officer is the Data Controller: Michael Wilkie, 17A South Gyle Crescent, Edinburgh, EH12 9FL, 0131 344 2500.

You should refer to the Privacy Notice at [www.lothian-vjb.gov.uk/privacy/](http://www.lothian-vjb.gov.uk/privacy/) for further information relating to the processing of personal data.

If you need further help, please contact us on the telephone number noted below.

**Electoral Registration Officer, 17A South Gyle Crescent, Edinburgh EH12 9FL**

**HELPLINE ~ 0131 344 2500**

E-Mail : [enquiries@lothian-vjb.gov.uk](mailto:enquiries@lothian-vjb.gov.uk) Visit our Website : [www.lothian-vjb.gov.uk](http://www.lothian-vjb.gov.uk)