



River District
OWEN SOUND

Form RD17

Application to Vote (Voter Information Card Used by an Imposter)

Last Name: _____ Given Name(s): _____

Telephone Number: _____

Qualifying Address

Suite/Unit Number: _____ Street Number: _____ Street Name: _____

Municipality: _____ Province: _____ Postal Code: _____

Mailing Address (if different than qualifying address above)

Suite/Unit Number: _____ Street Number: _____ Street Name: _____

City/Town: _____ Province: _____ Postal Code: _____

I, the above-named individual, having provided proof of identity as prescribed in O. Reg. 304/13 to the Election Manager or Assistant Election Officer, or completed a "Declaration of Identity" Form RD19, do hereby make the following declaration:

1. That I am an eligible Member of the River District and that I am on the Voters' List.
2. That I have not personally used my Voter Information Card or provided it to another person for voting purposes.
3. That I am **unable to vote** because my Voter Information Card has been used by an imposter.
4. That I understand and agree that I will be required to vote immediately at the Voting Place and:
 I currently have no knowledge of who has used my Voter Information Card but if I obtain additional information as to who has used my Voter Information Card, I will provide such knowledge to the police for further investigation and prosecution, or
 I have personal knowledge of who has used my Voter Information Card and will provide such knowledge to the police for further investigation and prosecution.
5. That I understand that should the Voter Information Card be received by mail or found, I shall immediately return the Voter Information Card to the Election

Manager, and I shall not attempt to use or give the Voter Information Card to another person for voting purposes.

I, _____, solemnly declare that all the statements contained in this application are true and I make this solemn declaration conscientiously believing it to be true and knowing that it is of the same force and effect as if made under oath.

Signature of Applicant

Date (yyyy/mm/dd)

Personal information requested on this form is collected under the authority of the *Municipal Act, 2001* and the *Municipal Freedom of Information and Protection of Privacy Act* for the purposes of determining if an applicant can be permitted to vote without a Voter Information Card. Questions about this collection should be directed to the Election Manager at riverdistrictelection@owensound.ca or 519-376-4440 ext. 1229.

Election Manager or Assistant Election Officer Use Only

I, the Election Manager or Assistant Election Officer for the River District Business Improvement Area, hereby acknowledge that I have verified the applicant's identity, permitted the applicant to vote immediately at the Voting Place, and have made note of this approved application on the Voters' List.

Signature

Date (yyyy/mm/dd)

I, the above-named individual, hereby acknowledge that I am being permitted to vote in the River District Board of Management election by the Election Manager or Assistant Election Officer.

Signature of Applicant

Date (yyyy/mm/dd)