RATEPAYER ELECTOR ENROLMENT FORM

This form must be used for every application for enrolment as a ratepayer elector.





 INSTRUCTION Make sure rates noting need to reside to reside to complet to complet OR Section 	ed ion)			ls your name on the rates lf yes , comp ls your name company/fir name listed	notice lete S e AND m/trus on the	e*? ECTION others st/soci rates	A below OR a ety (etc) notice*?		
For assistance	e phon	e: 0800 666 049				lf yes , comp	lete S	ECTION	Boverleaf
Complete th	n electronically at:	www.electionz.com/ratepayers							
Scan and en	nrr@electionz.com								
Or, post the	Ratepayer Elector Enrolments, PO Box 3138, Christchurch 8140								
SECTION A Your name is the ONLY name listed on your rates notice*									
		he full address of the						r rates	notice.*
	-	mber (if rural address):					-		
Street/Road na	me:								
Suburb:		l		Town/0	City:				
Valuation refere	ence nur	nber as it appears on the	rates notice*:			1			
 Please print your full name and the address where you are currently enrolled as a parliamentary elector. Note: You can check these details by calling the Electoral Commission on 0800 36 76 56 or by visiting: https://enrol.elections.org.nz/app/enrol/#/check 									
Your full name:									
Flat/House or R	apid nu	mber (if rural address):							
Street/Road nar	ne:								
Suburb:			Town/City:				Postco	de:	
A3 If your	postal	address is different t	o the address	s in A2 p	olease p	provide it here			
Flat/House or Rapid number (if rural address):			PO Box			/Private Bag nur	nber:		
Street/Road nar	ne:								
Suburb:			Town/City:	Town/City:			Postco	de:	
A4 Are you details	u enrol here	led as a ratepayer ele	ector for any o	other pi	roperty	? If yes, please	e provi	de tho	se property
	a separate sheet if necessary):			City or district council to which the application or nomination has been made:					
A5 Please sign/date and provide contact details. We will only contact you if we have any queries relating to this enrolment.									
 By signing this enrolment form I declare that: I am a parliamentary elector on the: general roll / Māori roll (tick one); I am the only person named as owner in the district valuation roll and only my name is listed on the rates account for the property listed in A1; I have not enrolled as a ratepayer elector for any other property OR if I am enrolled, I have provided those details in A4; and The details given on this form are true and complete. 									
Signed:					Date:				
Email:					Phone	number:			

SECTION B More than one name **or** a company/firm/trust/society (etc) name is listed on your rates notice*

IMPORTANT: PLEASE READ BEFORE COMPLETING THIS FORM. One of the persons named **OR** a representative of the company/firm/trust/ society (etc) named on the rates notice, must nominate (the nominator) a person to act as nominee (voter) on behalf of all parties listed on the rates notice. This form must be signed by both the nominator and the nominee. The nominator and nominee can be the same person.

B1	Please	print tl	ne full address of t	he property you	pay ra	tes on a	as it appears o	on your rates	notice.*	
Flat/Ho	ouse or R	apid nu	mber (if rural address)							
Street/	Road nar	ne:								
Subur	o:				Town/0	City:				
Valuati	on refere	ence num	ber as it appears on th	e rates notice* :						
B2 Please print ALL of the persons named OR the company/firm/trust/society (etc) name, as it is shown on the rates notice*.										
 Please print the name and residential address of the person who is being nominated to vote (the nominee) on behalf of those listed at B2. Note: These details should match the parliamentary electoral roll. You can check these details are correct by calling the Electoral Commission on 0800 36 76 56 or by visiting https://enrol.elections.org.nz/app/enrol/#/check 										
Nomin	ee's full	name:								
Flat/Ho	House or Rapid number (if rural address): PO Box/Private Bag number:									
Street/	Road nar	ne:						· · · · · ·		
Suburl	o:			Town/City:				Postcode:		
B4	If the n	omine	e's postal address i	s different to th	e addre	ess in B	3 please provi	de it here.		
Flat/Ho	ouse or R	apid nu	mber (if rural address)	:						
Street/	Road nar	ne:								
Suburl	o:			Town/City:				Postcode:		
B5	Is the r proper	nomine ty deta	e enrolled as a rate ils here.	epayer elector f	or any o	other p	roperty? If yes	, please prov	de those	
Full address of property/properties (continue on a separate sheet ij				if necess	f necessary): City or district council to which the application has been made:					
B6	Details	of all o	ther properties for v	which other nom	ination	s have	been made by t	the ratepayer(s) listed in B2	
Full address of property/properties (continue on a sep				on a separate sheet	separate sheet if necessary): City or district nomination h			council to which the application or is been made:		
B7 Please sign/date and provide contact details. We will only contact you if we have any queries relating to this enrolment.										
By sig as the	By signing this enrolment form I, as the nominator declare:• I am eligible to make this nomination on behalf of the names listed in B2. • The details given on this form are true and complete.									
Signed	l:					Date:				
Email:						Phone	number:			
 I, as the nominee named in B3, consent to this nomination. I am a parliamentary elector on the: general roll / Māori roll (tick one); The details given on this form are true and complete. 										
Signed	l:			-		Date:				
Email:						Phone	number:			
			l.							

