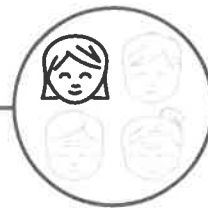


POWER OF ATTORNEY FOR REGISTRATION on the list of electors or the referendum list and APPLICATION TO VOTE BY MAIL



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
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

This power of attorney shall remain valid until withdrawn or replaced.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 request to vote by mail is only valid for the event for which you are making it. You will need to submit a new request each time you wish to vote by mail during an event.