



APPLICATION TO VOTE BY MAIL

- Instructions:**
1. Complete this form and deliver by hand, mail, fax or scanned email to the Legislative Services Department: 455 Wallace Street, Nanaimo, BC V9R 5J6 Fax: 250-755-4435 Email: elections@nanaimo.ca
 2. If your application is filled out correctly, the Legislative Services Department will send you a mail ballot package **as soon as ballots are available** (if we receive your application after October 6 and time may not permit mailing, you should arrange to pick up a package from the Legislative Services Department).
Applications will not be accepted after 4:00 p.m. on Friday, October 16, 2026.
 3. You are responsible for ensuring that your completed ballot is **received** before 4:30 p.m. on Friday, October 16, 2026 in the Legislative Services Department, 455 Wallace Street, Nanaimo, BC V9R 5J6 or between 8:00 am and 8:00 pm on General Voting Day, Saturday, October 17, 2026 at the City of Nanaimo Service and Resource Centre Voting Place located on the First Floor, 411 Dunsmuir Street.
 4. If you have any questions, please phone the Legislative Services Department at 250-755-4405, or send an email to elections@nanaimo.ca.

PLEASE PRINT

I, _____ apply to vote by mail as a [please choose (A) or (B)]:
(Please print full name of elector)

A. Resident Elector _____
(Please print residential address and postal code)

OR

B. Non-Resident Property Elector _____
(Please print address of real property in relation to which elector is voting)

and request that I receive a ballot to vote by mail, under the provisions of Section 110 of the *Local Government Act*, in the General Local Election to be held on Saturday, October 17, 2026. I hereby declare that I am:

- 18 years of age or older on October 17, 2026; **AND**
- a Canadian citizen; **AND**
- a resident of British Columbia for at least six months immediately before the day of voter registration; **AND**
- a resident of the City of Nanaimo; **OR**
a non-resident owner of real property in the municipality for at least 30 days immediately before the day of voter registration **AND**
- not disqualified by law from voting in an election.

I request you to provide me a mail ballot package as follows (**check only one**):

- ☐ mail it to my residential address; **OR**
- ☐ mail it to the following address: _____; **OR**
- ☐ Courier at my expense to the following address (contact our office to make arrangements):
_____; **OR**
- ☐ keep it at the Legislative Services Department for me to pick up; **OR**
- ☐ keep it at the Legislative Services Department for a third party to pick up on my behalf.

The third party is: _____ (Third party must be 18 years of age or older)

SIGNATURE OF ELECTOR

WITNESS

DATE

ADDRESS OF WITNESS

PHONE NUMBER AND/OR EMAIL ADDRESS OF ELECTOR: _____