

# Gedling Borough Council

## Application for Postal Vote

**Only one form for each person.** Please read the notes carefully before completing this form. If you need help filling in this form please phone **0115 901 3917**. Please write in **BLACK INK and BLOCK CAPITALS**.

### 1 Address where you are registered to vote

### 2 About you

First name and initials (if applicable)

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Surname

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Daytime or mobile telephone(Optional)

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Email address (Optional)

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### 3 For how long do you want a postal vote?

Until further notice

(Permanent Postal Vote)

(b) For elections on the following date

Day

Month

Year

(c) For elections between the following dates

From

Day

Month

Year

Until

Day

Month

Year

### 4 Address for postal ballot paper(s)

My address where I'm registered to vote in part 1 above

Or the following address

Postcode

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

### 5 Your declaration

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 (e.g. 02 05 1965)**

**Day**

**Month**

**Year**

If you fail to do this, the application will not be valid.

**Please SIGN in the box below using BLACK ink**  
**Important – keep signature within the border**

**Date of signing**

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PLEASE RETURN FORM TO  
**Electoral Services, Civic Centre, Arnot Hill Park,**  
**Arnold, Nottingham NG5 6LU**