



**Electoral Services**

3-5 Albion Street  
Huddersfield  
HD1 2NG

Tel: 01484 221650

[electoral.registration@kirklees.gov.uk](mailto:electoral.registration@kirklees.gov.uk)  
[www.kirklees.gov.uk/voting](http://www.kirklees.gov.uk/voting)

Dear Elector

**Register of Electors - Application to Vote by Post**

Please find attached to the end of this letter the relevant application form to vote by post.

All applicants for a postal vote must supply their signature and date of birth. This information is needed as a measure which may be used in the prevention and detection of fraud. It is particularly important that you enter your **usual** signature and that you sign all future election material in the same way. **You must not allow any other person to sign on your behalf.** **It is an offence to provide false information on the form, punishable on conviction by imprisonment of up to 2 years and/or a fine.**

You will receive an acknowledgement when your request has been successfully processed and your postal ballot paper will be posted out to you at the appropriate time for any election for which you qualify.

Along with your ballot paper you will receive a 'postal vote statement'. You will need to sign this statement and give your date of birth and these will be matched electronically with the details you provide on the application form. When you receive your postal ballot pack, you will place your actual ballot paper in a separate, sealed small envelope and then return this along with the statement in a larger return envelope. The opening of postal ballot papers takes place in secure conditions and at no time will your ballot paper be matched to your postal vote statement.

**If you need any further advice please ring 01484 221650 or email:  
[electoral.registration@kirklees.gov.uk](mailto:electoral.registration@kirklees.gov.uk).**

Yours sincerely,



**Sharon Salvanos**  
**Electoral Services Manager**

# Application Form to Vote by Post

Please complete in **BLACK INK and BLOCK CAPITALS** and return to Electoral Services, 3-5 Albion Street, Huddersfield, HD1 2NG. If you need help filling in this form please phone **01484 221650**.

## Address where you are registered to vote

## About you

First name(s) (in full)

Surname

Title (Mr, Mrs, Ms, Miss, Dr, Other)

## Your Date of Birth

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Day		Month		Year	

## 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.)

**Signature:** Keep within the border and use **BLACK INK**.

I cannot supply a signature because

**Date:**

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

Until further notice

For election(s) on

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

Month

Year

For election(s) until

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

Month

Year

## Address for postal ballot paper(s)

My address where I'm registered to vote or

The following address

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

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## Have you had help completing this form?

Name and Address of helper

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For office use only