

INSTRUCTIONS: REQUEST FOR MAIL BALLOT

Form No. 11-1 Page 1 of 2

1. Complete this application form and email, fax, mail, or deliver it to:

Chief Election Officer, Michelle Jones:
#202-4675 Marine Avenue, Powell River, B.C., V8A 2L2
Email: vote@qathet.ca Phone: 604-485-2260 Fax: 604-485-2216

2. If your application is complete, received by **4:00 p.m. on October 1, 2026**, and you qualify to vote by mail ballot, a mail ballot package will be sent to you as soon as the ballots become available.

If your application is received **after 4:00 p.m. on October 1, 2026**, you will be required to arrange pickup of your mail ballot package from the qathet Regional District main office.

3. You are responsible for ensuring that your completed ballot and documents are received by the chief election officer on GENERAL VOTING DAY (October 17, 2026) before the close of voting at 8 p.m.

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 the elector is voting)

and request that I receive a ballot to vote by mail, under the provisions of the *Local Government Act* section 110 in the election on GENERAL VOTING DAY

I hereby declare that I am:

- ☐ 18 years of age or older on general voting day, 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 regional district; OR
a non-resident owner of real property in the regional district for at least 30 days immediately before the day of voter registration; and
- ☐ not disqualified by law from voting in an election or otherwise disqualified by law.

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Form No. 11-1 Page 2 of 2

I request that you provide me with a mail ballot package as follows (*check ONLY one*):

- ☐ keep it at the qathet Regional District Office for me to pick up;
- ☐ keep it at the qathet Regional District Office for the following person to pick up :
Name _____ and

Address: _____

- ☐ mail it to my residential address; or
- ☐ mail it to the following address: _____

Date: _____

Signature of Elector: _____

Phone number and/or email address of Elector: _____

Freedom of Information and Protection of Privacy Act Notice

Personal information contained on this form is collected under the Freedom of Information and Protection of Privacy Act sections 26(a) and 26(c) and will be used only for the purpose of the mail ballot voting process for the 2021 by-election pursuant to the Local Government Act section 110. If you have any questions about the collection and use of this information, please contact the chief election officer or deputy chief election officer, LOCAL GOVERNMENT OFFICE, PHONE NUMBER OR EMAIL ADDRESS.