



POSTAL VOTE APPLICATION

Legislative Assembly Elections

ELECTOR TO COMPLETE

1

ELECTOR DETAILS

_____ (Surname/family name) _____ (All Christian or given names)

of

_____ (Address on electoral roll)

Ph: (BH) _____ (AH) _____ Mobile _____

E-mail: _____

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DECLARATION

I hereby apply for postal voting papers to enable me to vote at the forthcoming election and declare that I am entitled to apply for a postal vote as, during polling hours on polling day, I:

- Please tick (✓) the appropriate box(es)
- will not be in the Territory or within 20km of a polling place
 - will be travelling under conditions that prevent me voting at a polling place
 - will be unable to attend a polling place because of a physical or other disability, illness, or advanced pregnancy or other condition
 - will be caring for another person who has a physical or other disability, illness, or advanced pregnancy or other condition
 - will be unable to attend a polling place because of a reasonable fear or apprehension about my wellbeing or safety
 - am a prisoner
 - will be working and either of the following apply:
 - I am not entitled to leave of absence to vote
 - my attendance at a polling place to vote would be likely to cause me financial loss.
 - am unable for religious reasons to attend a polling place during polling hours or during the greater part of those hours
 - am a person whose address has been suppressed from the roll.

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ADDRESS TO WHICH
POSTAL VOTING
PAPER IS TO BE SENT

4

Signature or 'mark' of elector

Note: It is an offence to make a misleading statement to an authorised officer. Penalty: 100 penalty units or imprisonment for 6 months.

WITNESS TO COMPLETE (see over) (Please PRINT)

Signed by the elector in the presence of

Name: _____

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Address: _____

Signed before me at: _____

Signature of authorised witness _____ Date: ____/____/____

NTEC use only

Division: _____ Date Issued ____/____/____ Certificate No: _____ Initials: _____

WITNESSING AN APPLICATION

An authorised witness can be:

- within Australia or external Territory - a person enrolled on the Commonwealth electoral roll
- overseas - a person who is at least 18 years old.

A witness must:

- be satisfied as to the identity of the applicant and that the statements contained in the application are true
- see the applicant sign the application.

PRIVACY POLICY

The Commission requires the information on this form to issue you with postal voting papers. Failure to provide the information in full or in part may result in a postal voting paper not being issued.

Applications for postal votes are available for public inspection at the offices of the Commission for 14 days from, and including, the fourth day after the results of the election have been declared.

LODGING YOUR APPLICATION

Your application **MUST** be received by the Commission:

- By 6pm four days before polling day for postal voting papers to be sent to an overseas address or
- By 6pm two days before polling day for postal voting papers to be sent to an address within Australia.

You can fax the completed application to Darwin **(08) 8999 7630** or Alice Springs **(08) 8952 4216**, scan and e-mail to **ntec@nt.gov.au** or post or hand deliver to the offices of the Commission:

DARWIN
Head Office
 Level 3 TCG Centre
 80 Mitchell Street

GPO Box 2419
 Darwin NT 0801

Phone: (08) 8999 5000
 Fax: (08) 8999 7630

ALICE SPRINGS
MyVote Central
 Suite 3, Yeperenye Centre
 Gregory Terrace
(next to Commonwealth Bank)

PO Box 2304
 Alice Springs NT 0871

Phone: (08) 8951 5971
 Fax: (08) 8952 4216

Note: Any person eligible for a postal vote may instead cast an early vote in person at an early voting centre.

For further information go to the NTEC website www.ntec.nt.gov.au or call ☎ **1800 MYVOTE**



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