RATEPAYER ELECTOR ENROLMENT FORM

ŌTOROHANGA DISTRICT COUNCIL

INSTRUCTIONS

This form must be used for every application for enrolment as a ratepayer elector.



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M	RATES	
	,	זיין

Is your name the ONLY name listed on the rates notice*? If yes, complete SECTION A below

1 Make sure you hav rates notice befo	ve a copy of a recent re you begin, you will where indicated*			=	on the rates lf yes , comp			Abelow
2 Use the diagram to complete Section	o determine if you nee on A (the green sect orange section).				ls your name company/fir name listed lf yes , comp	m/trus on the	t/societ rates n	ty (etc) otice*?
Complete this form	n electronically at:	www.electic	nz.com/r	ratep	ayers			
Scan and email the	e paper form to:	nrr@electionz.com						
Or, post the paper	form to:	Ratepayer Elector Enrolments, PO Box 3138, Christchurch 8140						
SECTION A Your	name is the ONL	Y name list	ed on yc	our r	ates notice ³	k		
A1 Please print th	ne full address of the	e property you	pay rate	s on a	as it appears o	n your	rates n	otice.*
Flat/House or Rapid nur	mber (if rural address):							
Street/Road name:								
Suburb:			Town/City	/:				
Valuation reference nun	nber as it appears on the	e rates notice*:			·			
A2 Note: You can ch	our full name and the eck these details by calli ctions.org.nz/app/enrol	ng the Electoral	-		-	-		tary elector.
Your full name:								
Flat/House or Rapid nur	nber (if rural address):							
Street/Road name:								
Suburb:		Town/City:				Postcoc	de:	
A3 If your postal	address is different t	to the address	in A2 ple	ease p	provide it here	•		
Flat/House or Rapid number (if rural address):			PO Box/Private Bag number:					
Street/Road name:								
Suburb:		Town/City:				Postcoc	le:	
A4 Are you enroll details here.	ed as a ratepayer ele	ector for any o	other proj	perty	? If yes, please	e provid	le thos	e property
Full address of property	/properties (continue on	a separate sheet	if necessary	/):	City or district connection nomination has			e application or

A5	Please sign/date an enrolment.	d provide contact details. We will only contact you if we have any queries relating to this
By sig form	ning this enrolment I declare that:	• I am a parliamentary elector on the: general roll / māori roll (<i>tick one</i>);

 I am the only person named as owner in the district valuation roll and only my name is listed 	1
on the rates account for the property listed in A1 ;	
Library was a grant burger and a second stand for any station was a state. OD if Laws a grant library	

I have not enrolled as a ratepayer elector for any other property OR if I am enrolled, I have
provided those details in A4; and
The share the state of the Construction of the state of t

• The details given on this form are true and complete.

Signed:	Date:		
Email:	Phone number:		

SECTION B More than one name or a company/firm/trust/society (etc) name is listed on your rates notice*

IMPORTANT: PLEASE READ BEFORE COMPLETING THIS FORM. One of the persons named **OR** a representative of the company/firm/trust/ society (etc) named on the rates notice, must nominate (the nominator) a person to act as nominee (voter) on behalf of all parties listed on the rates notice. This form must be signed by both the nominator and the nominee. The nominator and nominee can be the same person.

B1	Please	print t	he full address of the	e property you	pay rat	tes on a	as it appears o	on your rates i	notice.*
Flat/Ho	ouse or R	apid nu	mber (if rural address):						
Street/	Road nar	ne:							
Suburb):				Town/C	City:			
Valuati	on refere	nce num	nber as it appears on the i	rates notice*:					
B2	Please rates n	print Al otice*.	LL of the persons nam	ed OR the com	pany/fi	rm/trus	st/society (etc)	name, as it is	shown on the
 Please print the name and residential address of the person who is being nominated to vote (the nominee) on behalf of those listed at B2. Note: These details should match the parliamentary electoral roll. You can check these details are correct by calling the Electoral Commission on 0800 36 76 56 or by visiting https://enrol.elections.org.nz/app/enrol/#/check 									
Nomin	ee's full i	name:							
Flat/Ho	ouse or R	apid nu	mber (if rural address):			PO Box	/Private Bag nur	nber:	
Street/	Road nar	ne:							
Suburb):			Town/City:				Postcode:	
B4	lf the n	omine	e's postal address is	different to th	e addre	ess in B	3 please provi	de it here.	
Flat/Ho	ouse or R	apid nu	mber (if rural address):						
Street/	Road nar	ne:							
Suburb):			Town/City:				Postcode:	
B5	Is the r	nomine ty deta	e enrolled as a ratep ils here.	ayer elector fo	or any o	other p	roperty? If yes	s, please provi	de those
	<u> </u>	•	//properties (<i>continue on</i>	a separate sheet	if necesso	ary):	City or district co nomination has	ouncil to which th been made:	e application or
B6	Details	of all o	ther properties for wh	nich other nom	ination	s have l	peen made by t	the ratepayer(s) listed in B2
Full address of property/properties (continue on a separate sheet if ne					if necesso	ary):	City or district council to which the application or nomination has been made:		
B7 Please sign/date and provide contact details. We will only contact you if we have any queries relating to this enrolment.									
By signing this enrolment form I, as the nominator declare:• I am eligible to make this nomination on behalf of the names listed in B2. • The details given on this form are true and complete.						B2 .			
Signed:						Date:			
Email:				Phone	number:				
	 I, as the nominee named in B3, consent to this nomination. I am a parliamentary elector on the: general roll / māori roll (tick one); The details given on this form are true and complete. 								
Signed	:					Date:			
Email:						Phone	number:		