RATEPAYER ELECTOR ENROLMENT FORM

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





INSTRUCTIONS

Make sure you have a copy of a recent rates notice before you begin, you will need to refer to it where indicated*

2 Use the diagram to determine if you need to complete Section A (the green section) OR Section B (the orange section).

For assistance phone: 0800 666 049

Complete this form electronically at:



www.electionz.com/ratepayers

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





Is your name AND others OR a company/firm/trust/society (etc) name listed on the rates notice*?

If yes, complete SECTION B overleaf

Scan and email the 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 ONLY name listed on your rates notice*											
A1 F	Please p	orint th	ne full address of the	property you	pay ra	tes on a	as it appears o	on your ra	tes ı	notice.*	
Flat/Hou	use or Ra	apid nur	mber (if rural address):								
Street/R	Road nan	ne:					'				
Suburb:				Town/City:							
Valuatio	n refere	nce nun	nber as it appears on the	rates notice*:							
Please print your full name and the address where you are currently enrolled as a parliamentary elector. Note: You can check these details by calling the Electoral Commission on 0800 36 76 56 or by visiting: https://enrol.elections.org.nz/app/enrol/#/check											
Your ful	ll name:										
Flat/Hou	use or Ra	apid nur	mber (if rural address):								
Street/R	load nam	ne:									
Suburb:	:			Town/City:				Postcode:			
A3 I	A3 If your postal address is different to the address in A2 please provide it here.										
Flat/House or Rapid number (if rural address):				PO Box/Private Bag numb			mber:				
Street/R	load nam	ne:									
Suburb:				Town/City:			Postcode:				
A4 6	Are you enrolled as a ratepayer elector for any other property? If yes, please provide those property details here.										
Full address of property/properties (continue on			a separate sheet if necessary):			City or district council to which the application or nomination has been made:					
A5 Please sign/date and provide contact details. We will only contact you if we have any queries relating to this enrolment.											
 I am a parliamentary elector on the: general roll / Māori roll (tick one); I am the only person named as owner in the district valuation roll and only my name is listed on the rates account for the property listed in A1; 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 details given on this form are true and complete. 											
Signed:						Date:					
Email:						Phone	number:				

society	(etc) nam	ed on the	e rates notice, must nom n must be signed by both	ninate (the nominato	r) a pėrso	n to act d	rs nominee (voter)	on beha	If of all p	arties listed on
B1	Please	print t	he full address of t	the property you	ı pay ra	tes on a	as it appears o	n your	rates ı	notice.*
Flat/H	ouse or R	apid nu	mber (if rural address)):						
Street	/Road nan	ne:								
Suburb:					Town/0	City:				
Valuat	ion refere	nce num	nber as it appears on th	ne rates notice* :						
B2		ase print ALL of the persons named OR the company/firm/trust/society (etc) name, as it is shown on the es notice*.								
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										
Nomir	nee's full r	name:								
Flat/H	at/House or Rapid number (if rural addre):	PO Box/Pri					
Street	/Road nan	ne:								
Subur	b:			Town/City:	Postcode:					
B4	If the n	f the nominee's postal address is different to the address in B3 please provide it here.								
Flat/H	ouse or R	apid nu	mber (if rural address)):						
Street	/Road nan	ne:								
Subur	b:			Town/City:	Town/City:			Postcode:		
В5	Is the nominee enrolled as a ratepayer elector for any other property? If yes, please provide those property details here.									
Full ac	Full address of property/properties (continue on a separate sheet if				if necess	f necessary): City or district council to nomination has been m				e application or
В6	Details	of all o	ther properties for	which other nom	nination	s have l				-
Full ac	all address of property/properties (continue on a separate sheet in			if necess	if necessary): City or district nomination has			council to which the application or s been made:		
В7	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.										
Signed:						Date:				
Email:						Phone	number:			
I, as the nomin				am a parliamentary ne details given on						
Signe	d:					Date:				
Email:						Phone	number:			

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