

INSTRUCTIONS:

1. Complete this application form AND email, fax, mail, or deliver it to the Chief Election Officer [contact information on bottom of page 2].
2. **IF** your application is received and fully complete, a mail ballot package will be sent to you as soon as the ballots are available [late September]. **IF** we receive your application after **Tuesday, October 6, 2026, at 12 noon**, the time may be insufficient for mailing and receipt of the ballot; therefore, we recommend that you arrange to pick up a mail ballot package directly from Parksville City Hall located at 100 Jensen Avenue East, Parksville, BC.
3. You are responsible for ensuring that your completed ballot and documents are received by the Chief Election Officer no later than **8 pm on General Voting Day, Saturday, October 17, 2026**.

I, _____ apply to vote by mail as a [please choose (A) or (B)]:
(Please print full name of elector)

A. Resident Elector _____

(Print residential address and postal code)

OR

B. Non-Resident Property Elector _____

(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 2026 City of Parksville general local election on GENERAL VOTING DAY, October 17, 2026.

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 City of Parksville; **OR**
- ☐ a non-resident owner of real property in the municipality 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.

Two (2) Pieces of Identification Provided [please refer to the enclosed Acceptable Forms of ID]. You must produce photocopies, of at least two (2) documents that provide evidence of your identity and place of residence, at least one (1) of which must contain your signature.

☐ _____

☐ _____

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

- ☐ keep it at City Hall for me to pick up; **OR**
☐ keep it at City Hall for the following authorized* person to pick up:

Name: _____

Address: _____

- ☐ mail it to my residential address as noted on page 1; **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 2026 general local election pursuant to the *Local Government Act* section 110. If you have any questions about the collection and use of this information, please contact:

AMANDA WEEKS
Chief Election Officer
250 954-3070

SARAH E ROSS
Deputy Chief Election Officer
250 954-3060

Email..... election-official@parksville.ca
In Person 100 Jensen Avenue East, Parksville BC
Mail..... PO Box 1390 Parksville, BC V9P 2H3
Fax 250 248-6650

****Authorized person means:***

- › *lives at the same address as the elector requesting the mail ballot package;*
- › *is related to the elector; or*
- › *is assisting only 1 other elector who does not live at the same address or is related to the elector requesting the mail ballot package.*