RATEPAYER ELECTOR ENROLMENT FORM

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



in onnent us a ratepayer elector.						VCT C			
 INSTRUCTIONS 1 Make sure you have a copy of a recent rates notice before you begin, you wi need to refer to it where indicated* 	: 	RATES			ls your name the ONLY name listed on the rates notice*? If yes, complete SECTION A below				
 2 Use the diagram to determine if you n to complete Section A (the green sec OR Section B (the orange section). For assistance phone: 0800 666 049 	eed				ls your name AND others O company/firm/trust/society name listed on the rates no lf yes , complete SECTION B			y (etc) ptice*?	
Complete this form electronically at	: www	w.electio	nz.con	n/ratep	ayers				
Scan and email the paper form to:	nrr(nrr@electionz.com							
Or, post the paper form to:	Rate	Ratepayer Elector Enrolments, PO Box 3138, Christchurch 8140						urch 8140	
SECTION A Your name is the ON	LY na	me liste	ed on	your ı	rates notice ³	*			
A1 Please print the full address of the	ne prop	erty you	pay ra	tes on	as it appears o	on your	rates n	otice.*	
Flat/House or Rapid number (if rural address):									
Street/Road name:									
Suburb:			Town/0	City:					
Valuation reference number as it appears on the	he rates	notice*:							
 Please print your full name and the A2 Note: You can check these details by can https://enrol.elections.org.nz/app/enr 	alling the	Electoral	-		-	-		tary elector.	
Your full name:									
Flat/House or Rapid number (if rural address):									
Street/Road name:									
Suburb:	Towr	n/City:				Postco	de:		
A3 If your postal address is different	t to the	address	in A2 p	olease	provide it here				
Flat/House or Rapid number (if rural address):				PO Box	x/Private Bag nur	nber:			
Street/Road name:									
Suburb:	Towr	n/City:				Postco	de:		
A4 Are you enrolled as a ratepayer e details here.	elector	for any o	ther p	roperty	/? If yes, please	e provi	de thos	e property	
Full address of property/properties (continue of	n a sepa	separate sheet if necessary):			City or district council to which the application or nomination has been made:				
A5 Please sign/date and provide con <i>We will only contact you if we have any gu</i>	tact de	etails.	enrolm	ont					
By signing this enrolment form I declare that: • I am the on on the rates	amentary ly perso s account nrolled a ose deta	y elector o n named a t for the pl as a ratepa ails in A4 ; a	n the: as owner coperty l yer elec nd	gener in the c isted in tor for a	district valuation i A1 ; ny other propert	roll and			

• 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	n your rate	s notice.*
Flat/H	ouse or F	Rapid nu	mber (if rural address):						
Street	/Road nar	ne:							
Subur	b:				Town/C	City:			
Valuat	ion refere	ence num	ber as it appears on the	rates notice*:					
B2	Please rates n	print A l otice*.	L of the persons nam	ed OR the com	pany/fi	rm/tru	st/society (etc)	name, as it i	s 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 									
Nomi	nee's full	name:							
Flat/H	ouse or F	Rapid nu	mber (if rural address):		PO Box/Private Bag numbe			nber:	
Street	/Road nar	ne:							
Subur	b:			Town/City:				Postcode:	
B4	4 If the nominee's postal address is different to the address in B3 please provide it here.								
Flat/H	ouse or F	Rapid nu	mber (if rural address):						
Street	/Road nar	ne:							
Subur	b:			Town/City:				Postcode:	
B5	ls the r proper	nomine ty deta	e enrolled as a ratep ils here.	ayer elector fo	or any c	other p	roperty? If yes	, please pro	vide those
Full address of property/properties (continue on a separate sheet i				<i>f necessary</i>): City or district council to which the application nomination has been made:				the application or	
B6	Details	of all o	ther properties for wi	nich other nom	ination	s have	been made by t	he ratepaye:	r(s) listed in B2
Full address of property/properties (continue on a separate sheet i				if necesso	City or district council to which the applicat 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.									
Signe	d:					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.							ll (tick one);		
Signe	d:					Date:			
Email						Phone	number:		



RUAPEHU DISTRICT COUNCIL