

# APPLICATION TO VOTE BY PROXY FOR A DEFINITE OR INDEFINITE PERIOD

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## VOTING BY PROXY

Proxy voting means that if you aren't able to cast your vote in person, you can have someone you trust cast your vote for you. You can use this form to apply to vote by proxy for one particular election or referendum only. In England and Wales you must be 18 or over on polling day to vote.

## HOW DO I APPLY TO VOTE BY PROXY?

- You must ask someone who is willing and capable to be your proxy and vote on your behalf. A person can only be a proxy for close relatives and up to two other people at an election or referendum. Close relatives are the spouse, civil partner, parent, grandparent, sibling, child or grandchild of the applicant. The person you wish to appoint as your proxy must be 18 or over and registered (or will be) to vote for that election.
- Fill in the proxy vote application form. You must give a reason why you want to vote by proxy, for example you may be abroad on holiday on polling day.
- Make sure you complete all sections of the form and supply your date of birth and signature. You need to give your date of birth and signature on this application form. This information is needed to prevent fraud. If you are unable to sign this form, please contact the electoral registration office.
- Return your form to your electoral registration office. Details are on the front of this form.

Your application form must arrive at the electoral registration office by 5pm, 11 working days before the poll when changing or cancelling an existing proxy, postal or postal proxy vote and by 5pm, 6 working days before the poll when applying for a new proxy vote.

If you are not already registered to vote, your application to register must have reached your electoral registration office by midnight, 12 working days before the poll.

## WHAT HAPPENS AFTER I'VE RETURNED THIS FORM?

- Your proxy must go to your polling station to vote. If your proxy cannot get to the polling station, they can apply to vote for you by post. They can apply to do this by 5pm, 11 working days before the poll. They can contact the electoral registration office for more details and to request a further application form for a proxy to vote by post.
- Your proxy will be sent a proxy poll card, telling them where and when to vote on your behalf. You should let your proxy know how you want them to vote on your behalf, for example, which candidate, party, or outcome.
- If it turns out that you are able to go to the polling station on polling day, you can vote in person as long as your proxy has not already done so or has not applied to vote for you by post.

## PRIVACY STATEMENT

The Electoral Registration Officer will only use the information you give them for electoral purposes. They will look after personal information securely and will follow data protection legislation. They will not give personal information about you or any personal information you may provide on other people to anyone else or another organisation unless they have to by law.

The lawful basis to collect the information in this form is that it is necessary for the performance of a task carried out in the public interest and exercise of official authority as vested in the Electoral Registration Officer as set out in the Representation of the People Act 1983 and associated regulations.

**The Electoral Registration Officer is the Data Controller.**

**For further information relating to the processing of personal data you should refer to their privacy notice on their website at [www.ipswich.gov.uk/content/privacy-policy](http://www.ipswich.gov.uk/content/privacy-policy)**

# APPLICATION FORM TO VOTE BY PROXY FOR A DEFINITE OR INDEFINITE PERIOD

Please complete all sections - INCLUDING THOSE RELEVANT OVERLEAF - in BLACK INK and BLOCK CAPITALS and post to Ipswich Borough Council, Grafton House, 15-17 Russell Road, Ipswich IP1 2DE

Or scan and attach to an email: 'Contact Us' forms located here:  
[https://my.ipswich.gov.uk/service/Elections\\_and\\_Registration](https://my.ipswich.gov.uk/service/Elections_and_Registration)

If you need help filling in this form please phone 01473 432000

## ADDRESS WHERE YOU ARE REGISTERED TO VOTE

## ABOUT YOU

First name(s) (in full)

Surname

Title (Mr, Mrs, Ms, Miss, Dr, Other)

Your Date of Birth (DD/MM/YYYY)

## ABOUT YOUR PROXY

Name (in full)

Address

Relationship to you (if any)

## FOR HOW LONG DO YOU WANT A PROXY VOTE?

Until further notice for elections(s) on: (DD/MM/YYYY)

For elections(s) until: (DD/MM/YYYY)

## REASON FOR THIS APPLICATION

## YOUR DECLARATION

As far as I know, the details on this form are true and accurate. I have asked the person named above who is willing and able to vote for me as my proxy.

Sign within the border using BLACK INK

Proxy's Declaration (optional) I am capable and willing to be appointed to vote as the applicant's proxy.

Sign within the border using BLACK INK

DATE

# SUPPORTING INFORMATION - BLIND OR RECEIVING HIGHER RATE MOBILITY ALLOWANCE

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**I CANNOT SUPPLY A SIGNATURE BECAUSE**

**Date**

If you asked someone to help you complete this form, please attach their name and address.  
Your application DOES NOT have to be supported by someone else if you are registered Blind or in receipt of the Higher rate Mobility Allowance. However, you must give the relevant number below:

I am Registered Blind by	Local Authority. My registered number is:
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**OR** I am currently in receipt of the Higher rate Mobility component of a Disability Living Allowance and my allowance number is:

**You should now return the form as requested.**

## SUPPORTING DECLARATIONS - DISABLED, MENTAL HOSPITAL DETAINEES OR OTHERS

### Who can support my application?

- If you have a long term illness or disability which makes it difficult for you to vote in person. It must be supported by one of the following: either a registered medical practitioner, a registered nurse, a registered dentist, a registered dispensing optician or optometrist, a registered chiropractor, a person registered under the Health Professions Order 2001 or a Christian Science practitioner. If you are in a residential home or sheltered housing, the matron, home care director or warden may support your application.
- If your job or educational course, or that of your spouse, takes you away from home for long periods (eg travelling salesman, long distance lorry driver, either your employer or your spouse's employer. In the case of a course then by the institution holding the course
- If you are self-employed your supporter: must be 18 or over, know you and not related to you.

### SUPPORT FOR THIS APPLICATION

**To be completed by your Supporter as fully as possible (where relevant)**

Name of Supporter:

Business Address of Supporter:

Capacity in which the support is made

Nature of physical incapacity of elector (if relevant)

The statutory provision under which the applicant is detained (in the case of mental health patients)

The job or course giving rise to this application

# SUPPORTER'S DECLARATION

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\* delete if not applicable

**I am properly qualified to support this application.**

- \* I am treating the applicant for the disability
- \* The person is receiving care from me in respect of that disability
- \* I have arranged care or assistance for them.
- \* The applicant cannot reasonably be expected to go in person to the allotted polling station or to vote unaided there by reason of that disability.
- \* The applicant is self-employed

**The information is true to the best of my knowledge and belief**

**Sign within the border using BLACK INK**

**Date**

**Please post your completed form to:**

Ipswich Borough Council,  
Grafton House  
15- 17 Russell Road  
Ipswich IP1 2DE

you can scan your completed forms and send them to us using the 'Contact Us' forms located here:  
[https://my.ipswich.gov.uk/service/Elections\\_and\\_Registration](https://my.ipswich.gov.uk/service/Elections_and_Registration)

**If you need help filling in this form telephone 01473 432000**