

REFERENDUM VOTE REQUEST FORM

Number or title of the by-law, resolution or ordinance subject to the referendum request

Number (block letters): _____

Title (block letters): _____

I, the undersigned, declare that I am a qualified voter with the right to be entered on the referendum list of the municipality and requests that a referendum be held on this by-law, in accordance with the *Act respecting elections and referendums in municipalities (CQLR, c. E-2.2)*.

First and last name (block letters):

Address giving the right to be registered on the referendum list (block letters):

Quality of the qualified voter

- domiciled
- owner of an immovable
- occupant of a business establishment
- co-owner of an immovable
- co-occupant of a business establishment

Signature

Contact information (optional)¹

Telephone number: _____

E-mail: _____

¹ This contact information will only be used in order to communicate with you if clarification is required in the processing of your request.

Declaration of the person who assisted the qualified voter who is unable to sign their referendum request (to be completed, if applicable)

I declare that I have assisted the person qualified to vote whose name and address appear above and that I am:

- his/her spouse or a parent;
- a person other than his/her spouse or a parent and that I have not provided assistance to another person qualified to vote who is not my spouse or a parent during the present referendum request procedure.

First and last name (block letters)

Signature
