Cliquez ici pour la marche à suivre.

LE DIRECTEUR GÉNÉRAL DES ÉLECTIONS DU QUÉBEC

Application to amend
the list of electors or referendum list

NON-DOMICILED ELECTOR*

Form no.

Municipality	Geographical code	District, ward or referendum sector	Poll of
			Y M D

1. Applicant (check off the person making the application and in the last two cases, identify the applicant)

☐ The person himself ▶ **IDENTIFICATION IN SECTION 2**

☐ A relative, spouse or a person who cohabits with the elector in question ▶

☐ An elector of the same polling subdivision (in the case of a striking only) ▶

Surname Given name

No. Street, avenue... (obligatory) Apt.

Municipality Postal code Telephone no.

2. Identification of the person concerned by the application (as on the municipal list of electors or referendum list)

Name of the legal person, where applicable (in the case of a referendum only)

Surname

Given name

Date of birth (Y M D) Sex Telephone no.

☐ Male ☐ Female

Address concerned by the application

No. Street, avenue... (obligatory) Apt.

Municipality Postal code

Indicate the number of:

The polling subdivision of the list of electors or the referendum list ▶

The elector's line appearing on the list of electors or the referendum list ▶

The elector's line appearing on the list of electors of the RCM (if applicable) ▶

3. Type of application

Check off the appropriate box according to the nature of the application

☐ **STRIKING**

Reason for the striking

1. deceased
2. personal decision
3. double entry
4. is not a qualified elector (is not of legal age, not a Canadian citizen, has not been domiciled in Québec for at least 6 months or has been found guilty of an offence that is a corrupt electoral practice)
5. has not been the owner of an immovable or has not been the occupant of an establishment for at least 12 months on the territory of the municipality or the RCM

Indicate the appropriate number ▶ ☐

☐ **CORRECTION**

Identify the error that must be corrected

☐ Surname ☐ Civic no.
☐ Given name ☐ Apartment no.
☐ Date of birth ☐ Name of street
☐ Sex

Indicate the correction that must be made:

4. Declaration under oath of the person making the application

I, the undersigned, declare under oath that, to the best of my knowledge, the information provided is accurate.

At _____ on this _____ (Y M D)

Municipality

Surname and given name in printed letters Signature

Name and signature of the person making the application

5. Decision and signatures of the revisors (at least two signatures are required)

☐ Application accepted ☐ Application rejected Reasons: _____

Date Revisor Revisor Revisor

* Everywhere the term "Elector" is used, the text should read "Person qualified to vote" during a referendum.