RATEPAYER ELECTOR ENROLMENT FORM

CHRISTCHURCH CITY COUNCIL

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



INSTRUCTIONS

Email:

Make sure you have a copy of a recent rates notice before you begin, you will need to refer to it where indicated*

2 Use the diagram to determine if you need to complete Section A (the green section) OR Section B (the orange section).

For assistance phone: 0800 666 049

Complete this form electronically at:



www.electionz.com/ratepayers

Is your name the ONLY name listed on the rates notice*?
If yes, complete SECTION A below





Is your name AND others OR a company/firm/trust/society (etc) name listed on the rates notice*?

If yes, complete SECTION B overleaf

Scan and en	nrr@electionz.com								
Or, post the paper form to:			Ratepayer Elector Enrolments, PO Box 3138, Christchurch 8140						
SECTION A Your name is the ONLY name listed on your rates notice*									
A1 Please print the full address of the property you pay rates on as it appears on your rates notice.*									notice.*
Flat/House or R	Rapid nui	mber (if rural address):							
Street/Road na	me:								
Suburb:				Town/0	City:				
Valuation refere	rates notice*:								
Please print your full name and the address where you are currently enrolled as a parliamentary elector. Note: You can check these details by calling the Electoral Commission on 0800 36 76 56 or by visiting: https://enrol.elections.org.nz/app/enrol/#/check									
Your full name:									
Flat/House or Rapid number (if rural address):									
Street/Road nar	ne:								
Suburb:			Town/City:				Postco	de:	
A3 If your postal address is different to the address in A2 please provide it here.									
Flat/House or Rapid number (if rural address):			PO Box/Private Bag nu			mber:			
Street/Road nar	me:								
Suburb:			Town/City:				Postco	de:	
Are you enrolled as a ratepayer elector for any other property? If yes, please provide those property details here.									
Full address of property/properties (continue on a separate sho				if necessary): City or district conomination has			ouncil to which the application or been made:		
A5 Please sign/date and provide contact details. We will only contact you if we have any queries relating to this enrolment.									
 I am a parliamentary elector on the: general roll / māori roll (tick one); I am the only person named as owner in the district valuation roll and only my name is listed on the rates account for the property listed in A1; I have not enrolled as a ratepayer elector for any other property OR if I am enrolled, I have provided those details in A4; and The details given on this form are true and complete. 									
Signed:					Date:				

Phone number:

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 the full address of the property you pay rates on as it appears on your rates notice.*										
Flat/H	louse or l	Rapid nu	mber (if rural addre	ss):						
Street	/Road na	me:								
Suburb:				Town/0	City:					
Valuat	ion refer	ence nun	nber as it appears or	the I	rates notice*:					
B2	Please rates n	print Alotice*.	LL of the persons	nam	ed OR the com	pany/fi	rm/trus	st/society (etc)	name, as it is	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	/House or Rapid number (if rural address): PO Bo					PO Box	√Private Bag nur	mber:		
Street	/Road na	me:			J					
Subur	b:				Town/City:				Postcode:	
B4	If the i	nomine	e's postal addres	s is	different to th	e addre	ess in B	3 please provi	ide it here.	
Flat/H	louse or l	Rapid nu	mber (if rural addre	ss):						
Street	/Road na	me:								
Subur	b:				Town/City:				Postcode:	
В5	Is the	nomine ty deta	e enrolled as a r ills here.	atep	ayer elector fo	or any o	other p	roperty? If yes	s, please prov	vide those
Full address of property/properties (continue on a separate sheet if ne				if necess			r district council to which the application or nation has been made:			
В6	Details	of all o	ther properties fo	or wh	nich other nom	ination	s have l	been made by	the ratepayer	(s) listed in B2
Full address of property/properties (continue on a separate sheet if necessary					ary):	City or district council to which the application or nomination has been made:				
B7	Please We will o	sign/da	ate and provide of act you if we have an	onta y que	act details. ries relating to this	s enrolme	ent.			
By sig	ning thi e nomina	s enroln ator dec			eligible to make details given on t				names listed ir	B2.
Signe	d:						Date:			
Email:							Phone	number:		
I, as the nominee named in B3, consent to this nomination. • I am a parliamentary elector • The details given on this form										
Signe	d:						Date:			
Email:	:						Phone	number:		

More than one name or a company/firm/trust/society (etc) name is listed on your rates notice*



SECTION B