



South Tyneside Council

For Office Use Only

Barcode:

Elector No:

PROXY VOTE APPLICATION

Please fill in this form, using black or blue pen and send it to **The Electoral Registration Office, Town Hall, Westoe Road, South Shields, NE33 1BR.**

If you cannot sign this form in part 6, please phone us on 0191 424 7230 for help.

1.	Your Name: _____ Your Address: _____ _____ Postcode: _____	Your contact details (optional): Home Tel: _____ Mobile Tel: _____ Email: _____																						
2.	At which election do you want a proxy vote? For the election held on _____																							
3.	Your Proxy's Details: Proxy's Surname: _____ Proxy's First Names: _____ Proxy's Address: _____ _____ Post Code: _____ Relationship to you <i>(if any)</i> _____ I have asked the person named as my proxy and confirm that he/she is willing and able to be appointed to vote on my behalf (please tick to confirm) . <input type="checkbox"/>																							
4.	Your Date of Birth: Write your date of birth in these boxes, using a black or blue pen . For example: <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>0</td><td>1</td><td>0</td><td>8</td><td>1</td><td>9</td><td>6</td><td>5</td></tr></table> → <table style="display: inline-table; vertical-align: middle; margin-left: 20px;"> <tr> <td style="text-align: center;">DAY</td> <td style="text-align: center;">MONTH</td> <td style="text-align: center;">YEAR</td> </tr> <tr> <td><table border="1" style="display: inline-table;"><tr><td> </td><td> </td></tr></table></td> <td><table border="1" style="display: inline-table;"><tr><td> </td><td> </td></tr></table></td> <td><table border="1" style="display: inline-table;"><tr><td>1</td><td>9</td><td> </td><td> </td></tr></table> </td> </tr> </table>		0	1	0	8	1	9	6	5	DAY	MONTH	YEAR	<table border="1" style="display: inline-table;"><tr><td> </td><td> </td></tr></table>			<table border="1" style="display: inline-table;"><tr><td> </td><td> </td></tr></table>			<table border="1" style="display: inline-table;"><tr><td>1</td><td>9</td><td> </td><td> </td></tr></table>	1	9		
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5.	Your Signature: Please sign your usual signature within the box, using a black or blue pen . Your signature must be completely inside the box, within the white area. _____ → <table border="1" style="width: 100%; height: 100%; text-align: center; vertical-align: middle;"> <tr><td style="width: 100px; height: 100px;"> </td></tr> </table> You must fill in the date of birth and signature boxes or your application will be returned to you. Today's Date:/...../.....																							

6. Reason for your application

6A. One Election Only

Fill in this section if you need someone to vote for you for just one election, for example you will be on holiday, or working away on election day.

I cannot get to my polling station on election day because:

Please give the reason, for example on holiday or working away.

Please check that you have filled in this form correctly and then return it to:

Electoral Registration Office
Town Hall, Westoe Road
South Shields, NE33 1BR

If you have any questions or need any help with this form, please phone us on:

0191 424 7230

The Absent Voting (Transitional Provisions) (E&W) Regulations 2006

Electoral Administration Act 2006, Section 14

Electoral Registration Officers must collect personal identifiers, a signature and date of birth, from all postal and proxy voters.

The identifiers will be stored securely and used to check the signature and date of birth given on a postal voting statement returned with a completed postal ballot paper at an election.

This measure is being taken to help prevent electoral fraud and will assist in deterring misuse of your entitlement to vote.

Under Section 14 (8) of the Act, the Electoral Registration Officer may allow the applicant to only give their date of birth if he is satisfied that the applicant is unable –

- a) To provide a signature because of any disability the applicant has,
- b) To provide a signature because the applicant is unable to read or write, or
- c) To sign in a consistent and distinctive way because of any such disability or inability.

Fair Processing Notice

We are responsible for protecting the public funds we manage. To do this we may use the information you give us on this form, or the information we hold about you, to detect and prevent crime or fraud. We may also share this information with other organisations that check and manage public funds.

For the purposes of the Data Protection Act 1998, the Electoral Registration Officer is the data controller (the person who holds, uses and processes the information). We will keep all information safe and secure.

If you would like to know more what information we hold about you, or the way we use your information, please contact our Elections Office. If you would like a list of the information we hold about you, please write to our Records Management Team at the Town Hall, Westoe Road, South Shields, NE33 2RL.