DISTRICT OF
Logan Lake
Discover Our Nature

INSTRUCTIONS: REQUEST FOR MAIL BALLOT

1. Complete this application form and email, fax, mail, or deliver it to the chief election officer at lgrimm@loganlake.ca or #1 Opal Drive, PO Box 190, Logan Lake, BC, V0K 1W0.
2. If your application is complete and you qualify to vote by mail ballot, a mail ballot package will be sent to you as soon as the ballots are available. If we receive your application after October 7, 2026 at 4PM, the time may be insufficient for mailing and receipt of the ballot; we recommend that you arrange to pick up a mail ballot package from the District of Logan Lake municipal offices.
3. You are responsible for ensuring that your completed ballot and documents are received by the chief election officer by October 17, 2026 before the close of voting at 8 p.m.

I,_____ apply to vote by mail as a [please choose (A) or (B)]:

(Please print full name of elector)

A. Resident Elector _____

(Please print residential address and postal code)

OR

B. Non-Resident Property Elector _____

(Please print address of real property in relation to which the elector is voting)

and request that I receive a ballot to vote by mail, under the provisions of the *Local Government Act* section 110 in the election on October 17, 2026.

I hereby declare that I am:

- ☐ 18 years of age or older on general voting day October 17, 2026; and
- ☐ a Canadian citizen; and
- ☐ a resident of British Columbia for at least six months immediately before the day of voter registration; and
- ☐ a resident of the municipality; OR
  a non-resident owner of real property in the municipality for at least 30 days immediately before the day of voter registration; and
- ☐ not disqualified by law from voting in an election or otherwise disqualified by law.

2 Pieces of Identification Provided (Types):

- ❑ _____
- ❑ _____

I request that you provide me with a mail ballot package as follows *(check ONLY one)*:

- ☐ keep it at the LOCAL GOVERNMENT Office for me to pick up;
- ☐ keep it at the LOCAL GOVERNMENT Office for the following person to pick up :
  Name _____ and

  Address: _____

- ☐ mail it to my residential address; or
- ☐ mail it to the following address: _____

Date:_____

Signature of Elector:_____

Phone number and/or email address of Elector:_____

Freedom of Information and Protection of Privacy Act Notice

Personal information contained on this form is collected under the Freedom of Information and Protection of Privacy Act sections 26(a) and 26(c) and will be used only for the purpose of the mail ballot voting process for the 2021 by-election pursuant to the Local Government Act section 110. If you have any questions about the collection and use of this information, please contact the chief election officer or deputy chief election officer, LOCAL GOVERNMENT OFFICE, PHONE NUMBER OR EMAIL ADDRESS.