

London Borough of Merton  
**Application To Vote By Post**

Only one form for each person. Please read the notes carefully before completing this form.  
If you need help filling in this form please phone 0208 545 3407

Please write in **BLACK INK** and **BLOCK CAPITALS**

**1 Address where you are registered to vote**

**5 Address for postal ballot paper(s)**

My address where I'm registered to vote in part 1 above *or*

The following address

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Reason for sending ballot paper(s) to an alternative address

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**2 About you**

First name(s) (in full)

Surname

Title (Mr, Mrs, Ms, Miss, Dr, Other)

Daytime or mobile telephone or email (Optional)

**6 Your declaration**

As far as I know, the details on this form are true and accurate. You can be fined for making a false statement on this form.

**Date of birth (e.g. 02 05 1965)**

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Day

Month

Year

**3 For how long do you want a postal vote?**

Until further notice

For election(s) on

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Day

Month

Year

For election(s) until

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Day

Month

Year

**4 Postal vote for which elections**

All elections you are entitled to vote at

**SIGN in the box below using BLACK ink**

**Important – keep signature within the border**

**Date of signing** \_\_\_\_\_

Please return to:

Electoral Services, London Borough of Merton, Civic Centre, London Road, Morden, SM4 5DX or  
electoral.services@merton.gov.uk  
Helpline: 0208 545 3407