



How do I apply to vote by proxy?

- 1** You must ask someone if they are willing and able to be your proxy and vote on your behalf. Please note that a person can only be the proxy for close relatives and up to two other people at the same election.
- 2** Fill in the proxy vote application form. You must give a reason why you need to vote by proxy. You must get a qualified person to sign your application. See notes below for information on who can support your application.
- 3** Make sure **you** complete all sections of the form and supply your date of birth and signature.
- 4** Return your form as soon as possible to the address shown below.

**Rochford District Council
Electoral Registration Officer
Council Offices, South Street
Rochford
Essex
SS4 1BW**

Please **do not** return your form to the Electoral Commission. **Please note:** this form can only be used **after the sixth day** before an election and must arrive at your electoral registration office before **5pm** on the day of the election.



Voting by proxy

If you have had a medical emergency that took place 6 working days before an election or after that time, you can apply to vote by emergency proxy (someone else voting on your behalf). You can apply up until 5pm on election day.

This form should not be used if you have been detained in a hospital under Section 145 of the Mental Health Act 1983 in England and Wales or Section 329 of the Mental Health (Care and Treatment) (Scotland) Act 2003 in Scotland.

Who can support my application?

- a registered medical practitioner, including a dentist, optician, pharmacist, osteopath, chiropractor and psychologist
- a registered nurse
- a Christian Science practitioner
- a registered health professional
- a registered social worker
- a registered mental health manager or their representative
- if you live in a residential care home, the person registered as running that home
- if you live on premises provided for people of pensionable age or disabled persons, the warden of those premises

What happens after I've returned this form?

- Your proxy must go to **your** polling station to vote on your behalf.
- You should tell your proxy how you want them to vote on your behalf, for example, which candidate or which party.
- Your local election office will tell your proxy when and where to vote on your behalf.
- You will need to give your date of birth and signature on this application form. This information is needed to prevent fraud. If you are unable to sign this form, please contact your Electoral Registration Officer

Voting as proxy

A person can only be a proxy for close relatives and up to two other people at an election.

Close relatives are the spouse, civil partner, parent, grandparent, brother, sister, child or grandchild of the applicant.

The proxy must be eligible to vote.

More information

If you have any questions about voting by proxy, go to www.aboutmyvote.co.uk or contact your electoral registration office.

In England and Wales, the electoral registration office is based at your local council. In Scotland, it may be a separate office. For contact details, go to www.aboutmyvote.co.uk

This form does not apply in Northern Ireland. Visit www.eoni.org.uk for more information.

Application to vote by emergency proxy



Only one person can apply to vote by emergency proxy using this form. Write in black ink and use **BLOCK LETTERS**. When you have filled in every section and signed the form yourself, send it to your local electoral registration office. You can get the address at www.aboutmyvote.co.uk

8 Support for this application

Read the notes to see who can support this application. Please ask the person who is supporting your application to give their name, address and position.

Supporter's full name

Supporter's address

Postcode

Supporter's position

9 Supporter's declaration, signature and date

To the best of my knowledge and belief, the applicant is suffering from the disability given in the application and is not able to go to the polling station on election day or vote there unaided.

The applicant became disabled on:

Signature

Date

D	D	M	M	Y	Y	Y	Y