

Electoral Services  
London Borough of Sutton  
Civic Offices  
St Nicholas Way  
Sutton  
SM1 1EA

Tel: 020 8770 4179  
Email: [electoralservices@sutton.gov.uk](mailto:electoralservices@sutton.gov.uk)  
Website: [www.sutton.gov.uk/voting](http://www.sutton.gov.uk/voting)

## Postal Voting Application

If you want to vote by post please complete all sections of the application form on the reverse of this letter and return it to the address shown above. You can scan and email your application to [electoralservices@sutton.gov.uk](mailto:electoralservices@sutton.gov.uk) - please do not send us a photo as the image quality is too low and it cannot be processed.

In order to vote by post at an election, you must return your completed application by **5pm on the 11<sup>th</sup> working day before an election.**

If you have any queries please contact my office on the number above.

Yours sincerely



Martha Matheou  
**Head of Electoral Services**

# 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 020 8770 4179

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

## 1. Address where you are registered to vote

## 4. Address for postal ballot paper(s)

My address where I'm registered to vote

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)

## 3. How long?

(a) Until further notice (tick the box)

(b) For the election(s) or referendums to be held on:

--	--

Day

--	--

Month

--	--	--	--

Year

(c) Until (add an end date)

--	--

Day

--	--

Month

--	--	--	--

Year

## 5. 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)

--	--

Day

--	--

Month

--	--	--	--

Year

**SIGN in the box below using BLACK ink**  
**Important – keep signature within the border**

Date of signing: \_\_\_\_\_

If you fail to date the application it will not be valid.