Making a difference...together

APPLICATION TO VOTE BY MAIL

ELECTOR NFORMATION (PLEASE PRINT)		
LAST NAME:	**FIRST NAME:**	**MIDDLE NAME:**
RESIDENTIAL STREET ADDRESS:		**CITY/TOWN AND POSTAL CODE**
MAILING ADDRESS OR P. O. BOX (IF DIFFERENT FROM RESIDENTIAL ADDRESS):		**CITY/TOWN AND POSTAL CODE**
IF YOU ARE A NON-RESIDENT PROPERTY ELECTOR – PROVIDE THE FULL ADDRESS OF REAL PROPERTY IN RELATION TO WHICH YOU ARE VOTING:		
PHONE NUMBER:	**EMAIL ADDRESS:**	

DECLARATION - **By signing and submitting this application, I DECLARE THAT I AM:**

- 18 years of age or older on general voting day (October 17, 2026); and
- a Canadian citizen; and
- a resident in the electoral area OR
  a registered owner of real property in the electoral area for at least the past 30 days; and
- a resident of BC for at least the past 6 months; and
- not disqualified by any enactment from voting in a Local Government Election or otherwise disqualified by law.

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

☐ Mail it to my residential address

☐ Mail it to the following address:

_____

☐ Keep it at the office of the Capital Regional District for me to pick up:

☐ **Victoria:** 625 Fisgard St. ☐ **Salt Spring Island:** 108-121 McPhillips Ave.

☐ Keep it at the office of the Capital Regional District for_____to pick up on my behalf

☐ **Victoria:** 625 Fisgard St. ☐ **Salt Spring Island:** 108-121 McPhillips Ave.

_____ _____

SIGNATURE OF ELECTOR ***DATE***

SHADED AREA FOR COMPLETION BY STAFF ONLY

Method of Mail Ballot Request: ☐Mail ☐Email ☐Phone ☐In Person ☐Other

Date of Mail Ballot Request: _____, 2026

Registered Resident Elector: ☐Yes ☐No

Registered Non-Resident Elector: ☐Yes ☐No

Ballot Type: _____

Date Mail Ballot Issued: _____, 2026

Date of Mail Ballot returned to Chief Election Officer: _____, 2026

Mail Ballot returned by: ☐Mail ☐Courier ☐Third Party ☐In Person ☐Other

☐ Mail Ballot ACCEPTED ☐ Mail Ballot REJECTED

Reasons for rejection: _____

_____ Date (month/day/year)

_____ Chief Election Officer or Designate

PLEASE NOTE

Upon receipt and approval of your request, the Capital Regional District will send you a mail ballot package or advise you that they are ready to be picked up.
Mail ballot applications are due September 30, 2026. Applications received after this date **will not be mailed**. They may be picked up at one of the CRD Offices listed below during regular office hours, 8:30am– 4:30pm, Monday to Friday, excluding statutory holidays.

To be counted, you are responsible for ensuring that your completed mail ballot is received at the offices of the Capital Regional District at one of the addresses below no later than 4:00 pm on Friday, October 16, 2026.
For more information contact Legislative Services, at 250.360.3642 or email elections@crd.bc.ca.

RETURN COMPLETED FORM TO THE ATTENTION OF: Chief Election Officer, Capital Regional District

METHOD	VICTORIA OFFICE	SALT SPRING ISLAND OFFICE
In Person	625 Fisgard Street, Victoria	108-121 McPhillips Ave., Salt Spring Island
Mailing Address	625 Fisgard Street, Victoria, BC V8W 1R7	
Email	elections@crd.bc.ca	

Freedom of Information and Protection of Privacy Act Collection Notice

Personal information collected by this form is authorized 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 conducting local government elections pursuant to Part 3 and/or Part 4 of the Local Government Act. If you have any questions about the collection and use of this information, please contact the Kristen Morley, chief election officer, or Marlene Lagoa, deputy chief election officer, Capital Regional District, 625 Fisgard Street, Victoria, 250-360-3127 OR elections@crd.bc.ca.