Claim for inclusion on the roll of non-resident owners of rateable land or the roll of occupiers and rate-paying lessees for Uralla Shire Council for the COUNCIL ELECTION to be held on 14 September 2024.

Form for nomination of an elector by joint / several, corporate or trustee owners,

occupiers or rate-paying lessees

Instructions:

This form must be received by the General Manager of Uralla Shire Council by 6:00pm (EST) Monday 5 August 2024.

PO Box 106, Uralla, NSW 2358 By post:

By hand: 32 Salisbury Street, Uralla, NSW 2358

By email: council@uralla.nsw.gov.au

Do not use this form if you are an individual owner, occupier or ratepaying lessee. Use instead Form for nomination for individual owners, occupiers and rate-paying lessees.

Note: A person may not be enrolled more than once for the same Ward. A person who is qualified for enrolment in more than one Ward in a Council area may only be enrolled in the Ward in which the person is qualified as a resident. If not a resident, they may be enrolled in the Ward specified in a notice by the person to the Council's General Manager before the closing date for the election, or if no such notice is given, a Ward chosen by the General Manager.

Overall, a person cannot vote more than once in the Local Government Area.

Section 1 –	Property De	tails							
Lot #:	DP/SP#	:	_ For <u>rat</u>	epaying lessee	es only –	Rates a	assessment number:		
Suite/Level/Uni	t/Street Number	& Street Name: _							
Town/Suburb: _				State:			Postcode:		
Council:	Uralla Shire Co	ıncil	٧	Vard A or B <u>3):</u>					
Section 2 –	Details of no	minator/s							
							ominating the elector. Include full names of equired, attach another page).		
We are the (tie	only:	Owners Date your occur		•			Occupiers of the property described in Section 1.		
For <u>ratepaying</u>	lessees only:	Date until whic	h you are	e liable to pay i	rates: _	/	/		
Nominator'	's contact deta	ils							
Surname:				Given I	Name(s):	:			
	11				, ,				
Phone number: Email address:									
	:								
						s an elec	ctor for Uralla Shire Council in		
Ward (A or B)									
I am authorised	l by the above no	minators to make	e this no	mination.					

Nominator's signature:			Date:	
		Given Name(s) :		
Date of birth:/				
	Ema			
Residential Address Stree	et Number & Street Name:			
Town/Suburb:		State:		Postcode:
Postal address (if differen	nt to residential address):			
occupiers and ratepa	and claim the inclusion of my nar aying lessees for Uralla Shire Cou d in this or another Ward of Uralla \textsquare\text	ncil, in Ward (A or B)		able land or the roll of
Claimant's signature:	_		Date:	
<u> </u>				
statements in the claim al Witness surname:	re true.	Witness given name(s):		
Witness signature:			Date:	
Date received/	/ Received by:			
	/ Processed by:			
Claim allowed?	No Elector inform	ned of outcome? Yes] No Da	te/