

# Form for nomination of an elector by joint / several, corporate or trustee owners, occupiers or ratepaying lessees

## Instructions:

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

By post: Locked Bag 8821 Wollongong DC NSW 2500

By hand: 41 Burelli Street Wollongong

By email: [council@wollongong.nsw.gov.au](mailto:council@wollongong.nsw.gov.au)

**Do not** use this form if individual owner, occupier or ratepaying lessee. Use instead **Form for nomination for individual owners, occupiers and ratepaying 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 Details

Lot #: \_\_\_\_\_ DP/SP#: \_\_\_\_\_ For ratepaying lessees only – Rates assessment number: \_\_\_\_\_

Suite/Level/Unit/Street Number & Street Name: \_\_\_\_\_

Town/Suburb: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

Council: **Wollongong City Council** Ward (1, 2 or 3): \_\_\_\_\_

## Section 2 – Details of nominator/s

Identify the joint/several, corporate or trustee owners, occupiers or ratepaying lessees nominating the elector. Include full names of individuals, company names, trusts, ABNs and ACNs as appropriate: *(If more space is required, attach another page)*.

We are the (tick one):  Owners  Ratepaying Lessees  Occupiers of the property described in Section 1.

**For occupiers only:** Date your occupancy expires: \_\_\_\_/\_\_\_\_/\_\_\_\_

**For ratepaying lessees only:** Date until which you are liable to pay rates: \_\_\_\_/\_\_\_\_/\_\_\_\_

## Nominator's contact details

Surname: \_\_\_\_\_ Given Name(s): \_\_\_\_\_

Date of birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Phone number: \_\_\_\_\_ Email address: \_\_\_\_\_

Postal address: \_\_\_\_\_

I nominate \_\_\_\_\_ as an elector for Wollongong City Council in Ward (1, 2 or 3) \_\_\_\_\_.

I am authorised by the above nominators to make this nomination.

Nominator's signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

### Section 3 – Nominated elector's details

Surname: \_\_\_\_\_ Given Name(s) : \_\_\_\_\_

Date of birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Phone number: \_\_\_\_\_ Email address: \_\_\_\_\_

Residential Address Street Number & Street Name: \_\_\_\_\_

Town/Suburb: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

Postal address (if different to residential address): \_\_\_\_\_

- I am entitled to enrol and claim the inclusion of my name on the roll of non-resident owners of rateable land or the roll of occupiers and ratepaying lessees for Wollongong City Council, in Ward (1, 2 or 3) \_\_\_\_\_.
- I am already enrolled in this or another Ward of Wollongong City Council

(tick one):  Yes  No

Claimant's signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

### Section 4 – Statement by witness

I am of or above the age of 18 years. I saw the claimant sign this claim, and believe, to the best of my knowledge that the statements in the claim are true.

Witness surname: \_\_\_\_\_ Witness given name(s): \_\_\_\_\_

Witness signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

### Office Use Only

Date received \_\_\_\_/\_\_\_\_/\_\_\_\_ Received by: \_\_\_\_\_

Processed date \_\_\_\_/\_\_\_\_/\_\_\_\_ Processed by: \_\_\_\_\_

Claim allowed?  Yes  No

Elector informed of outcome?  Yes  No

Date \_\_\_\_/\_\_\_\_/\_\_\_\_