

**APPLICATION FOR ENTRY IN THE POSTAL VOTERS LIST BY  
PERSONS WITH A PHYSICAL ILLNESS OR A PHYSICAL DISABILITY**

**PLEASE READ THE NOTES OVERLEAF BEFORE COMPLETING THE FORM**

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**PART A - PARTICULARS OF APPLICANT**

**NAME** (Block letters): \_\_\_\_\_

**ADDRESS** (Block letters) \_\_\_\_\_

\_\_\_\_\_

I hereby declare that I am unable to go in person to vote at a polling station by reason of a physical illness or a physical disability and that I am ordinarily resident at the above address. I hereby apply to have my name entered in the postal voters list.

**SIGNATURE OR MARK:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

**WITNESS (in case of mark) :** \_\_\_\_\_

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**PART B - MEDICAL CERTIFICATE**

**THIS PART MUST BE COMPLETED IN THE CASE OF A FIRST APPLICATION AND, IN THE  
CASE OF SUBSEQUENT APPLICATIONS, WHERE REQUIRED BY THE REGISTRATION  
AUTHORITY.**

I hereby certify that the above named applicant has a physical illness or a physical disability, the nature and extent of which is as follows:

\_\_\_\_\_  
\_\_\_\_\_

and for that reason will be unable to go in person to the polling station to vote.

The physical illness or physical disability is likely to continue for \_\_\_\_\_

**SIGNATURE OF REGISTERED MEDICAL PRACTITIONER:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

## THE POSTAL VOTERS LIST

### PLEASE READ THESE NOTES BEFORE COMPLETING THE FORM

Under the Electoral Act, 1992, amended by the Electoral (Amendment) Act, 1996, an elector with a physical illness or disability who is living at home may apply to his/her local registration authority to be included in the postal voters list. An elector in this category is not eligible for entry in the special voter's list. An elector whose name is entered in the postal voter's list may vote only by post at an election or a referendum.

**Who can apply?** You may apply for inclusion in the postal voters list if you are living at home and you are unable to go in person to vote at a polling station by reason of a physical illness or a physical disability which is likely to continue for the duration of the register of electors in respect of which the application is made.

**Who fills out the application?** The application form is divided into two parts. The applicant must complete Part A of the form. In the case of a first application, Part B of the form must be completed by a doctor. Part B must also be completed in the case of a second or subsequent application, if required by the registration authority.

**Where do I send the application form?** Completed application forms must reach your registration authority not later than **25 November**. A stamp is required if you send the form by post. Otherwise send or deliver it to the head office of your City Corporation or County Council (**see address below**).

**What happens next?** You will be notified by the registration authority of the decision on your application and, if it is refused, you will be given the reasons for the refusal.

#### **Please note that:**

- (i) your application cannot be processed for the postal voter's list which will come into force on 15 February next if not received by 25 November. However, you will be considered in any Supplementary Postal Voters Lists produced.
- (ii) your application will be deemed to be withdrawn if you fail to furnish any additional information or documents required by the registration authority within the period specified by the authority.
- (iii) It is an offence to apply for entry in the postal voter's list in the name of another person or knowingly to give false or misleading information in relation to an application.
- (iv) A Supplementary Postal Voters List will be produced in the event of an Election or Referendum. The closing date for this is the day the Minister for the Environment and Local Government makes the order appointing polling day or in the event of a General Election the date of the dissolution of the Dail.

**Completed forms should be returned to:**

**Dublin City Council  
Franchise Section  
Block 4, Floor 1  
Civic Offices  
Wood Quay  
Dublin 8**

**Phone No: 222 5010**