

# **APPLICATION FORM FOR THE HOLDING OF A REFERENDUM POLL**

**BY-LAW NO. 90-58-114 ENTITLED: BY-LAW AMENDING ZONING BY-LAW NO. 90-58 IN ORDER TO CREATE A NEW INDUSTRIAL ZONE 328M FROM PART OF THE EXISTING COMMERCIAL ZONE 239C AND TO ESTABLISH PARTICULAR PROVISIONS APPLICABLE IN SAID ZONE 328M**

I, undersigned, declare that I am a qualified voter entitled to have my name entered on the referendum list of the sector concerned by the by-law and request the holding of a referendum poll on this by-law, in conformity with an *Act respecting elections and referendums in municipalities* (CQLR c. E-2.2).

**Contested provision(s):** \_\_\_\_\_

**Zone:** \_\_\_\_\_

**First and last name** (block letters): \_\_\_\_\_

**Address giving the right to be on the referendum list** (block letters):

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

## **Quality of qualified voter**

- domiciled - Since (day/month/year) : \_\_\_\_\_
- owner of an immovable - Since (day/month/year) : \_\_\_\_\_
- occupant of a business establishment - Since (day/month/year) : \_\_\_\_\_
- co-owner of an immovable - Since (day/month/year) : \_\_\_\_\_
- co-occupant of a business establishment - Since (day/month/year) : \_\_\_\_\_

### ***Attach a copy of one of the pieces of identification mentioned here under:***

- health insurance card issued by the RAMQ ;
- driver's license or probationary license issued by the SAAQ;
- Canadian passport;
- certificate of Indian Status;
- Canadian Forces identity card.

**Signature :** \_\_\_\_\_

**Date :** \_\_\_\_\_

**Contact information** (optional)<sup>1</sup>

Phone number: \_\_\_\_\_

E-mail: \_\_\_\_\_

**Declaration of the person who assists a qualified voter who is unable to sign their own application must register (to be completed, if any)**

I declare that I have assisted the qualified voter whose name and address are listed above and that I am:

- their spouse or parent;
- a person that is neither a parent nor a spouse, and that I did not assist another qualified voter who is not a spouse or parent during the present referendum poll application process;

**First and last name** (block letters):

\_\_\_\_\_

**Signature:**

\_\_\_\_\_

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<sup>1</sup> This contact information will only be used to contact you if clarification is required to process your application.