

Signature

The Corporation of the Township of Nipissing
45 Beatty Street
Nipissing ON P0H 1W0
Telephone 705-724-2144 Fax 705-724-5385
www.nipissingtownship.com

Council Vacancy Application NOTE A Council Vacancy Application may only be Municipal Elections Act, 1996 filed in person; it may not be faxed or e-mailed Instruction It is the responsibility of the person applying Please print or type information (except signatures) to file a complete and accurate application Council Vacancy Application of a person to be a candidate for appointment to the position of Councillor for the Township of Nipissing Candidate Full Name: For the Office of: Councillor Candidate's full qualifying address within the municipality Street Number: Street Name: City/Town Postal Code Province Candidate's full mailing address within the municipality (if different from qualifying address above) Street Number: Street Name: City/Town Province Postal Code **Declaration of Qualification** the applicant mentioned in this form, declare that I am presently legally qualified or would be presently legally qualified if I were not a member of the Legislative Assembly of Ontario or the Senate House of Commons of Canada, to be elected and to hold the office for which I have applied and I make this solemn declaration conscientiously believing it to be true and knowing that it is of the same force and effect as if made under oath. Declared before me at the _____ in the ______of ____ this _____, 2021. Signature of Applicant Signature of Clerk or Commissioner, etc. Signature of Clerk or Designate Date Filed (yyyy/mm/dd) Time Filed **Certification by Clerk or Designate** I the undersigned clerk of this municipality do hereby certify that I have examined the application of the aforesaid candidate filed with me and am satisfied that the candidate is qualified to be appointed and that the appointment complies with the Act.

Date Filed (yyyy/mm/dd)