

FORM 12

APPLICATION FOR A DUPLICATE ELECTORS REGISTRATION CARD

CAYMAN ISLANDS

ELECTIONS LAW

section 20(5)

(2009 Revision)

To the Supervisor of Elections
Elections Office
Smith Road Centre
150 Smith Road, 2nd Floor
George Town
Grand Cayman

I, _____ whose postal address is _____
(give full first and surnames in block capitals) *(street address)*

_____ of _____,
(street address)

solemnly and sincerely declare that –

- (a) I am qualified as an elector under section 25(1) of the Cayman Islands Constitution contained in the Second Schedule to the Cayman Islands (Constitution) Orders 1972 to 1993;
- (b) I am not disqualified from voting under section 26 of the said Order or under the Elections Law (2009 Revision);
- (c) I was the holder of a electors registration card which was issued to me (on or around the _____ day of _____, 20____)
(insert date if known)

and that the said card has been *lost/mutilated/destroyed/defaced in the following
*(*delete as applicable)*

circumstances-

(here set out in detail the circumstances)

- (d) I apply for a duplicate electors registration cards;
- (e) *I undertake that if the original card which was issued to me is found that I will return it forthwith to you

OR

*I enclose with this application my present mutilated or defaced card.
*(*delete as applicable)*

Dated this _____ day of _____, 20____.

Signature of applicant: _____

Signature of witness: _____

Name of witness: _____

(in block capitals)