

FORM 12

section 20(5)

APPLICATION FOR A DUPLICATE ELECTORS REGISTRATION CARD

CAYMAN ISLANDS

**ELECTIONS LAW
(2017 Revision)**

To the Supervisor of Elections
Elections Office

I, _____ who resides at _____
(give full first and surnames in block capitals) *(street address)*

(street address)

and whose postal address is _____,

solemnly and sincerely declare that –

- (a) I am qualified as an elector under section 90 of the Cayman Islands Constitution contained in the Second Schedule to the Cayman Islands (Constitution) Orders 2009;
- (b) I am not disqualified from voting under section 91 of the said Order or under the Elections Law (2017 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/strikeout 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/strikeout as applicable)*

Dated this _____ day of _____, 20____.

Signature of applicant: _____

Signature of witness: _____

Name of witness: _____

Address of witness: _____

Telephone Number of witness: _____

Voter ID Number of witness: _____

(in block capitals)