## **910** (18/05)

## **APPLICATION FOR INITIATIVE PETITION**



## PLEASE PRINT IN BLOCK LETTERS OR TYPE

RESIDENTIAL ADDRESS *  CITY/TOWN  MAILING ADDRESS (IF DIFFERENT FROM ABOVE)  CITY/TOWN  * In accordance with section 168 of the Recall and Inite the following personal information be obscured from Note: If personal information is to be obscured, an alternate telephone number that can be made public must be particularly address.	public inspection: e address and	RESID	DAYTIME PHONE *  ( )  ENTIAL ADDRESS  EPHONE NUMBER
* In accordance with section 168 of the Recall and Initiathe following personal information be obscured from Note: If personal information is to be obscured, an alternate telephone number that can be made public must be personal information.	iative Act, I request that public inspection:	EMAIL RESID	EPHONE NUMBER
In accordance with section 168 of the Recall and Initiation the following personal information be obscured from  Note: If personal information is to be obscured, an alternate telephone number that can be made public must be personal information.	iative Act, I request that public inspection:	RESID	EPHONE NUMBER
In accordance with section 168 of the Recall and Initiathe following personal information be obscured from  Note: If personal information is to be obscured, an alternate telephone number that can be made public must be	iative Act, I request that public inspection:	RESID	EPHONE NUMBER
the following personal information be obscured from  Note: If personal information is to be obscured, an alternate telephone number that can be made public must be personal information in the public must be personal information be obscured.	public inspection: e address and	RESID	EPHONE NUMBER
telephone number that can be made public must be p		TELE	
ALTERNATE ADDRESS			
			ALTERNATE PHONE ( )
<ul> <li>and unambiguous manner and be in relation to a matter wit</li> <li>A non-refundable processing fee of \$50 must accompany the payable to the Minister of Finance). Uncertified cheques with</li> </ul>	nis application (cash, mo	•	heque, or certified cheque
I, the undersigned, declare that, I am a registered voter and the initiative Act from making this application.	that I am not disqualified	d under sections 53, 56	3, 79, or 82 of the <i>Recall and</i>
SIGNATURE OF APPLICANT/PROPONENT	AT (CITY/ TOWN)		DATE: (YYYY/MM/DD)
WARNING: Signing a false statement is a serious offence ar Initiative Act.	nd is subject to significar	nt penalties under sect	ion 162 of the <i>Recall and</i>
CHIEF E	LECTORAL OFFICE ONLY		
TITLE OF PETITION			
EVENT NUMBER DATE RECEIVED	(YYYY/MM/DD)	PROPONENT NUM	BER