



**AFFIDAVIT**  
(To be completed by Voters without identification)

DECLARATION (to be completed by the applicant)

**SECTION 1**

I, \_\_\_\_\_, do solemnly swear/affirm that I am the person as indicated for the  
*(Full Name)*

2021 Municipal Election and do currently reside at \_\_\_\_\_,  
*(Civic Address)*

in the City of Corner Brook and that all information provided in the said application is true and current.

Furthermore, I am unable to include any supporting documentation to verify my application.

DECLARED before me at Corner Brook, Newfoundland, this \_\_\_\_\_ day of \_\_\_\_\_, 2021

\_\_\_\_\_  
Returning Officer/Deputy Returning Officer

\_\_\_\_\_  
Voter

**Privacy Notice**

Collection of person information via this form is authorized under the Access to Information and Protection of Privacy Act, 2015 and is needed to affirm the identity of a voter without identification. Questions about the collection and use of the information may be directed to the Returning Officer, [elections@cornerbrook.com](mailto:elections@cornerbrook.com)

Please send completed form to:

Contact Information  
City Hall  
PO Box 1080  
Corner Brook, NL A2H 6E1

For further information:  
Phone: 709-637-1534  
Email: [elections@cornerbrook.com](mailto:elections@cornerbrook.com)