

PARTICULARS TO BE PROVIDED BY HOUSEHOLDERS OR OWNERS OR OCCUPIERS OF PREMISES

From: The Supervisor of Elections

To: [name] _____

of [address] _____

You are required to complete and return this form to the Supervisor of Elections within fourteen days of its receipt by you.

You are required to list below the names and occupation of each person residing in your household/premises situated at _____ who satisfies all of the following criteria-

(a) is a British subject and deemed to belong to the Virgin Islands within the meaning of section 2 (2) of the Constitution.

(b) has attained the age of eighteen years

(c) Is, on the date of execution of this form, domiciled in the Virgin Islands

(d) is not disqualified on the date of execution of this form disqualified to be registered as a voter under the Laws of the Virgin Islands

(e) is not already registered to vote in the Virgin Islands

Surname	Forenames	Occupation

I certify that the information provided herein is true to the best of my knowledge, information and belief.

Dated this _____ day of _____, 20_____.

Signature of householder/owner or occupier of premises