CANDIDATE'S CONSENT TO NOMINATION

(To be given on or within one month before the last day for delivery of nomination papers, and delivered at the place and within the time appointed for delivery of nomination papers)

ELECTION/CO-OPTION OF A COMMUNITY COUNCILLOR

For the [Ward of the]

COMMUNITY OF BAY OF COLWYN

I (*name in full*)

of (*home address in full)*

Hereby consent to my nomination as a candidate for election/co-option as a Community Councillor for
[the ward of] the **Community of Bay of Colwyn**.

I declare that on the day of my nomination I am qualified and that, if there is a poll on the day of election, I will be qualified to be so elected/co-opted by virtue of being on that day or those days a qualifying Commonwealth citizen, a citizen of the Republic of Ireland or a citizen of another Member State of the European Community, who has attained the age of 18 years and that

*(a) I am registered as a local government elector for the administrative area of the Bay of Colwyn in respect of (*qualifying address in full)*

And my electoral number (see note below) is ; or

*(b) I have during the whole of the twelve months preceding that day or those days occupied as owner or tenant of the following land or other premises in the Bay of Colwyn area (*description and address of land or premises*)

; or

*(c) my principal or only place of work during those twelve months has been in the Bay of Colwyn area at (*give address of place of work and, where appropriate, name of employer)*

; or

*(d) I have during the whole of those twelve months resided in the Bay of Colwyn area or within 4.8 kilometres of the Boundary (*give address in full)*

* delete whichever is appropriate, (but you can include all those that apply)

I declare that to the best of my knowledge and belief I am not disqualified from being elected/co-opted by reason of any disqualification set out in Section 80 of the Local Government Act 1972, or any decision made under Section 79 of the Local Government Act 2000 (copies of which sections are enclosed)

Date of Birth: Signature:

Date of Consent:

Signed in my presence
Signature of Witness:

Name and address of witness (PLEASE PRINT)