NGĀ POARI Ā-HAPORI COMMUNITY BOARD **PUKA TONO | NOMINATION FORM** WELLINGTON CITY COUNCIL | 2025 ELECTIONS

Absolutely Positively Wellington City Council Me Heke Ki Põneke



Important Notes:

- 1. The front page of completed nomination forms are required to be available for public inspection at the Wellington City Council Head Office Reception, Level 16, 113 The Terrace, Wellington.
- 2. Candidate name, email address and/or phone number details as provided in Section B will be made available from the
- 3. Nominator names may also be made available from the council's website.
- 4. In this form LEA = Local Electoral Act 2001 and LER = Local Electoral Regulations 2001

A TE ROHE PŌTI ELECTION AREA								
I wish to stand for election as a Community Board Member for the following election:								
Mākara-Ōhāriu Community Board		Tawa Community Board						
My principal place of residence (tick ONE circle):	is WITHIN the eindicated above		is NOT WITHIN the election area indicated above					
B MĀ TE KAITONO CANDIDATE TO	FILL OUT (after red	ading important infor	mation on reverse)					
I (candidate's full name),								
accept the nomination and confirm that I have read and understand the Eligibility and Candidacy Notes on the reverse of this form and certify that I am qualified to be a candidate under Section 25 of the LEA and the LER and that I am not disqualified under Section 58 of the LEA. In particular, I am a New Zealand citizen and a New Zealand parliamentary elector.								
Contact details (will be made available for public inspection):								
Phone No.:	Email Address:							
I am also standing for the following elections:								
I wish my name to be shown on the voting document as:								
I wish to use the following affiliation (to be left blank if the candidate does not wish to use any party / group affiliation. A candidate with no affiliation may request that 'independent' be shown. Maximum length is 38 characters (including any spaces between words)):								
Signature:			Date:					
C MĀ TE KAITAUTOKO NOMINATO	ORS TO FILL OUT							
We, the undersigned electors of the Community Board area selected in Section A of this form, hereby nominate the candidate listed in Section B with their consent, as a candidate for the office of Community Board Member , the election for which is to be held on 11 October 2025.								
Full name of First Nominator:								
Residential Address:								
Phone No.:								
Signature of First Nominator:								
Full name of Second Nominator:								
Residential Address:								
Phone No.:								
Signature of Second Nominator:								

D CANDIDATE CONTACT DETAILS FOR THE ELECTORAL OFFICER/OFFICIAL								
These contact details will not be made public and will be used for election communication by the Electoral Officer/Official:								
Residential Address:								
(For the following 2 fields only complete if different from details listed in Section B of this form):								
Phone No.: Email Address:								
ELIGIBILITY & CANDIDACY NOTES								
1 Candidates for this position do not need to live within the election area indicated in Section A, but must be a New Zealand citizen and enrolled as a New Zealand parliamentary elector. 2 Both nominators must be enrolled as electors of the election area indicated in Section A. 3 No person can be elected to a local authority if they are concerned or interested in contracts over \$25,000 with that local authority. This restriction is waived if prior approval from the office of the Controller and Auditor-General is obtained (Section 3(1) Local Authorities (Members' Interests) Act 1968). 4 A candidate may stand for either the regional council or city/district council/community board in the regional council's district, but not both. 5 A candidate cannot nominate themself for office. 6 A candidate may under Section 56 of the LEA be nominated under a name which the candidate is commonly known as provided that the name will not: cause offence to a reasonable person; be unreasonably long; include or resemble an official rank or title; cause confusion or mislead electors (Section 56 of the LEA). 7 Where no affiliation is claimed, or an affiliation is disallowed by the Electoral Officer under Section 57 of the LEA, nothing will be shown in the public notice or the voting paper alongside the candidate's name. A candidate with no affiliation may request that 'Independent' be shown. 8 Under Section 121 of the LEA, any person is liable to a fine of up to \$2,000 who: (a) Knowing themselves to be ineligible for election, consents to being nominated for election; or (b) Nominates any person as a candidate whom they know to be ineligible for election; or (c) Not being the candidate signs any nomination paper knowing that they are not qualified to vote at the election. 9 Each nomination must be accompanied by the required deposit of \$200.00 (GST inclusive) or proof of an electronic deposit. 10 Evidence of NZ citizenship is required at the time of candidate nomination. Acceptable evidence includes a copy of a NZ passpor								
RETURN, PAYMENT AND REFUND DETAILS								
I submit with this nomination	Evidence of	Evidence of	<u> </u>		Profile			
(please tick appropriate circles):	NZ citizenship	deposit	Photo		statement			
I understand that if I do not provide a profile or photo, the words "Profile/Photo not supplied" will appear below my name in the profile booklet that will be sent out with the voting paper.								
Deliver to (do not post): Wellington City Council Head Office Reception, Level 16, 113 The Terrace, Wellington								
Or, scan and email to: election@wcc.govt.nz								
Payments can be made by cash directly at the Wellington City Council Head Office Reception, Level 16, 113 The Terrace, Wellington, if you are returning this form by hand or by online banking using the details provided below:								
Account name:	Wellington City Council	Bank:		ANZ				
Account number:	06 0582 0106111 000	Particulars/reference:		2025 Elections				
Code:	e: (Your initials and surname)							
Refunds of Nomination Deposits Where eligible, refunds of nomination deposits will be made by online deposit into your nominated bank account. Please provide either a bank deposit slip or verification of your bank account for the processing of your refund. Verification can be a screen shot from online banking or from the top of a bank statement, and must include the bank logo, the account name and the bank a/c number.								
ELECTORAL OFFICIAL TO FI	LL OUT							
Received at the hour of:	on the	day of			20			
Candidate roll #:								
First nominator roll #:		Second nominator ro	II #:					
Nomination documents	Nomination paper	Deposit/proof deposit	of		Place of residence			
approved:	Photo	Profile statem	ent	() F	Proof of NZ citizenship			
	Standing for other elections	Deposit refundation	d					
Signature of Electoral Official:	CICCUOIIS	Vermeation	[Date:				