## KAIKAUNIHERA | COUNCILLOR 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 the following election (Note - Tick one box only, candidates cannot stand for more than one Ward):				
Motukairangi/Eastern General Ward	Paekawakawa/Southern General Ward	Pukehīnau/Lambton General Ward		
Takapū/Northern General Ward	Te Whanganui-a-Tara Māori Ward	Wharangi/Onslow-Western General Ward		
My principal place of residence (tick ONE circle):	is <b>WITHIN</b> the election area indicated above	is <b>NOT WITHIN</b> the election area indicated above		
MĀ TE KAITONO   CANDIDATE TO	CILL OUT (after reading important info	rmation on rayarra)		
MĀ TE KAITONO   CANDIDATE TO FILL OUT (after reading important information on reverse)				
I (candidate's full name),				
accept the nomination and confirm that I have read and understand the <b>Eligibility and Candidacy Notes</b> 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 fo	or 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   NOMINAT	ORS TO FILL OUT			
We, the undersigned electors of the Wellington City Council election area selected in <b>Section A</b> of this form hereby nominate the candidate listed in <b>Section B</b> above with their consent, as a candidate for the office of <b>Councillor</b> , 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 Wellington City Council election area, but must be a New Zealand citizen and enrolled as a New Zealand parliamentary elector.  2 Both nominators must be enrolled as electors of Wellington City Council for the election area selected in Section A of this form.  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 be 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. Accepta					
RETURN, PAYMENT AND REFUND DETAILS					
Loubmit with this pomination					
(please tick appropriate circles):    Vidence of   Evidence of   Evidence of   Photo   Photo   Statement   Photo   Pho					
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:	(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 FILL OUT					
Received at the hour of:	on the	day of	20		
Candidate roll #:					
First nominator roll #:		Second nominator roll #:			
Nomination documents approved:	Nomination paper Photo	Deposit/proof of deposit  Profile statement	Place of residence Proof of NZ citizenship		
	Standing for other elections	Deposit refund verification			

Date:

Signature of Electoral Official: