

CO-OPTION OF PARISH COUNCILLOR
for the
PARISH OF LUBENHAM

Name of applicant			
Address			
E-mail address			
Phone		Mobile	

Please give your reasons for wishing to join the Parish Council, and explain what you will bring to the Council for the benefit of the village.

Please continue on reverse if necessary.

Please Note

You may be asked to elaborate on the contents of this application letter, and current councillors may also wish to ask you direct questions before taking a vote.

Signed		Date	
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**CANDIDATE'S CONSENT TO CO-OPTION
CO-OPTION OF PARISH COUNCILLOR
for the
PARISH OF LUBENHAM**

I, (name in full)	
of (home address in full)	

hereby consent to being co-opted as a Parish Councillor for the Parish of Lubenham

I declare that I am qualified and that I will be qualified to be so co-opted by virtue of being on the day of co-option a 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 above parish in respect of (qualifying address in full)

and my electoral number is

or *(b) I have during the whole of the twelve months preceding the date of my co-option occupied as owner or tenant the land or other premises in that Parish (description and address of land or premises)

or *(c) My principal or only place of work during those twelve months has been in that Parish at (give address of place of work and, if appropriate, name of employer)

or *(d) I have during the whole of those twelve months resided in that Parish or within three miles of it (give full address):

I declare to the best of my knowledge and belief I am not disqualified from being elected by reason of any disqualification set out in Section 80 of the Local & Government Act 1972, a copy of which is included, and I do not hold a politically restricted post, within the meaning of Part I of the Local & Government and Housing Act 1989, under a local authority within the meaning of that Part.

Signed		Signed in the presence of	
Date		Signature of witness	