Appointment of observers

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|  | | |
| Observer name: |  | |
| Observer address: |  | |
| Neighbourhood Plan area: |  | |
| Signature of observer: |  | |
|  | | Please tick |
| I would like to be a Polling observer | |  |
| I would like to be a Counting observer | |  |
| I would like to be a Postal Vote observer  *You must be appointed as a counting observer to observe the opening of postal votes* | |  |