



**THE CORPORATION OF THE  
TOWN OF HALTON HILLS**

1 Halton Hills Drive  
Halton Hills, ON  
L7G 5G2  
Phone: 905-873-2600  
clerks@haltonhills.ca

|   |  |
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| <p><b>NOTE</b></p> <ul style="list-style-type: none"> <li>A Council Vacancy Application may only be filed in person; it may <u>not</u> be faxed or e-mailed.</li> <li>It is the responsibility of the person applying to file a complete and accurate application.</li> <li>Please print or type information (except signatures)</li> </ul> | <h2 style="margin: 0;">Council Vacancy<br/>Application Form</h2> |
|---|--|

**Council Vacancy Application of a person to be a candidate for appointment to the position  
of \_\_\_\_\_ for the Town of Halton Hills**

|                      |                    |
|----------------------|--------------------|
| Candidate Full Name: | For the Office of: |
|----------------------|--------------------|

Candidate's full **qualifying address** within the municipality

|                |              |
|----------------|--------------|
| Street Number: | Street Name: |
|----------------|--------------|

|              |          |             |
|--------------|----------|-------------|
| Municipality | Province | Postal Code |
|--------------|----------|-------------|

Candidate's full mailing address (if different from qualifying address above)

|                |              |
|----------------|--------------|
| Street Number: | Street Name: |
|----------------|--------------|

|              |          |             |
|--------------|----------|-------------|
| Municipality | Province | Postal Code |
|--------------|----------|-------------|

**Declaration of Qualification and Consent**

I \_\_\_\_\_ the applicant mentioned in this form, declare that I am presently legally qualified to be appointed to hold the office of \_\_\_\_\_, and I consent to accept the appointment to that office, if appointed. I make this solemn declaration conscientiously believing it to be true and knowing that it is of the same force and effect as if made under oath.

|   |                                 |
|---|---------------------------------|
| Declared before me at the Town of Halton Hills in the Region of Halton<br>this _____ day of _____, 2025.<br><br>_____<br>Signature of Clerk or Commissioner, etc. | _____<br>Signature of Applicant |
|---|---------------------------------|

|                         |            |                            |                                 |
|-------------------------|------------|----------------------------|---------------------------------|
| Date Filed (yyyy/mm/dd) | Time Filed | Candidate or Agent Initial | Signature of Clerk or Designate |
|-------------------------|------------|----------------------------|---------------------------------|

**Certification by Clerk or Designate**

I the undersigned clerk of this municipality do hereby certify that I have examined the application of the aforesaid applicant filed with me and am satisfied that the nominee is qualified to be appointed and that the appointment complies with the *Act*.

|           |                         |
|-----------|-------------------------|
| Signature | Date Filed (yyyy/mm/dd) |
|-----------|-------------------------|