Village of Farmingdale Absentee Ballot Application

Inc. Village of Farmingdale
361 Main Street, Farmingdale, NY 11735
(516)249-0093

Please print clearly. See detailed instructions on back.

This application must either be personally delivered to the Village Clerk not later than the day before the election, or postmarked by a governmental postal service not later than 7th day before election day. The ballot itself must be received by the Village Clerk no later than the close of polls on election day.

1. **I am requesting, in good faith, an absentee ballot due to (check one reason):**
- ☐ absence from county or New York City on election day
- ☐ temporary illness or physical disability
- ☐ permanent illness or physical disability
- ☐ duties related to primary care of one or more individuals who are ill or physically disabled
- ☐ resident or patient of a Veterans Health Administration Hospital
- ☐ detention in jail/prison, awaiting trial, awaiting action by a grand jury, or in prison for a conviction of a crime or offense which was not a felony

2. absentee ballot(s) requested for the following election(s) :
- ☐ Primary Election only   ☐ General Election only   ☐ Special Election only
- ☐ Any election held between these dates: absence begins: _____/_____/_____ (MM/DD/YYYY)   absence ends: _____/_____/_____ (MM/DD/YYYY)

3.
last name or surname	first name	middle initial	suffix

4.
date of birth MM/DD/YYYY _____/_____/_____	county where you live	phone number (optional)	email (optional)

5. address where you live (residence) street   apt   city   state   zip code
NY

6. Delivery of Primary Election Ballot (check one)   ☐ Deliver to me in person at the board of elections
- ☐ I authorize (give name):_____ to pick up my ballot at the board of elections.
- ☐ Mail ballot to me at: (mailing address)

_____
street no.   street name   apt.   city   state   zip code

7. Delivery of General (or Special) Election Ballot (check one)   ☐ Deliver to me in person at the board of elections
- ☐ I authorize (give name):_____ to pick up my ballot at the board of elections.
- ☐ Mail ballot to me at: (mailing address)

_____
street no.   street name   apt.   city   state   zip code

Applicant Must Sign Below

8. I certify that I am a qualified and a registered (and for primary, enrolled) voter; and that the information in this application is true and correct and that this application will be accepted for all purposes as the equivalent of an affidavit and, if it contains a material false statement, shall subject me to the same penalties as if I had been duly sworn.

Sign Here: **X**_____ Date _____/_____/_____ (MM/DD/YYYY)

If applicant is unable to sign because of illness, physical disability or inability to read, the following statement must be executed: By my mark, duly witnessed hereunder, I hereby state that I am unable to sign my application for an absentee ballot without assistance because I am unable to write by reason of my illness or physical disability or because I am unable to read. I have made, or have the assistance in making, my mark in lieu of my signature. (No power of attorney or preprinted name stamps allowed. See detailed instructions.)

Date ___/___/___ (MM/DD/YYYY)   Name of Voter:_____ Mark:_____

I, the undersigned, hereby certify that the above named voter affixed his or her mark to this application in my presence and I know him or her to be the person who affixed his or her mark to said application and understand that this statement will be accepted for all purposes as the equivalent of an affidavit and if it contains a material false statement, shall subject me to the same penalties as if I had been duly sworn.

_____   _____
(address of witness to mark)   (signature of witness to mark)

Instructions:

Who may apply for an absentee ballot?
Each person must apply for themselves. It is a felony to make a false statement in an application for an absentee ballot, to attempt to cast an illegal ballot, or to help anyone to cast an illegal ballot.

Where and when to return your application:
Applications must be mailed seven days before the election, or hand-delivered to your Village Clerk by the day before the election. Mailing address is:
Village Clerk
Village of Farmingdale
361 Main Street
Farmingdale, NY 11735

Options available to you if you have an illness or disability:
If you check the box indicating your illness or disability is permanent, once your application is approved, you will automatically receive a ballot for each election in which you are eligible to vote, without having to apply again. You may sign the absentee ballot application yourself, or you may make your mark and have your mark witnessed in the spaces provided on the bottom of the application. Please note that a power-of-attorney or printed name stamp is not allowed for any voting purpose.

When your ballot will be sent:
Your absentee ballot materials will be sent to you at least 6 days before the election in which you are eligible to vote. If applicant or agent delivers the application to the Village Clerk in person after the seventh day before the village election and not later than the day before the election, the Village Clerk shall deliver such absentee ballots for those applicants or their agents named in the application when such applicants or agents appear in the Village Clerk's office.