

Town of Henlopen Acres

104 Tidewaters
Henlopen Acres, DE 19971

302-227-6411

fax: 302-227-3978

email: townhall@henlopenacres.com

VOTER REGISTRATION

(This form must be signed and delivered to Town Hall by mail, email, or in person along with proof of residency, 30 days **before** election)

LAST NAME: _____ JR/SR/III: _____

FIRST NAME: _____ MIDDLE INITIAL: _____

ADDRESS OF YOUR PRIMARY RESIDENCE: _____

PHONE NO: _____

HENLOPEN ACRES ADDRESS: _____

RESIDENT ☐

If Henlopen Acres; Date Residency Established: ____/____/____

PROOF OF RESIDENCY: _____
Driver's License State and Number, Lease Agreement, etc.**NONRESIDENT/PROPERTY OWNER** ☐Authority to Vote: Individual ☐, Trust ☐, Corporate Resolution ☐, Partnership ☐, LLC ☐
(contact Town Hall for a Certificate of Authorization form if other than individual owners)

Date Ownership Commenced: _____

Proof of Ownership: _____
Deed, Trustee Agreement

- ☐ I am a United States citizen age 18 or older.
- ☐ The information I have provided is true to the best of my knowledge under penalty of perjury. If I have provided false information, I may be fined and/or imprisoned.
- ☐ I would like to receive election results and Public Notices by email.
My email address is: _____.
- ☐ I consent to have my name, addresses, phone number and email address published in the Henlopen Acres Directory.

Signature of Voter_____
Date-----
Town use only

Date Received: _____

Form of Identification: _____

ID No. _____

Date Approved: _____ Approved By: _____