# Form of Attestation

To be used by residential care homes only where National Insurance Number is not available to corroborate a resident’s identity for the purpose of registering to vote

--

Name and address of Care Home

Download and personalise this form at:
[www.brighton-hove.gov.uk/voting-outreach](http://www.brighton-hove.gov.uk/voting-outreach)

To: The Electoral Registration Officer

 Brighton & Hove City Council

I am writing to confirm the identity of the following people resident at the residential care home (address above):

|  |  |  |
| --- | --- | --- |
| First name | Surname | Date of birth |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

I understand that Brighton & Hove City Council will only use the information provided for electoral purposes and they will look after personal information securely according to the Data Protection Act 1998.

I understand it is an offence to provide false information. The maximum penalty is six months in prison and/or a £5,000 fine.

Signed:

Position:

Please print name: