



Declaration for person to be removed from Register

DECLARANT DETAILS

Surname

Forename

Address

Postcode

Phone No.

Date of birth (DD/MM/YYYY)

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National insurance number

(for example AB123456D)

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Tick this box if you have never had a National Insurance number

Email

I HEREBY inform the Electoral Office for Northern Ireland that the person whose details I have listed below no longer lives at my address as detailed above.

PERSON TO BE REMOVED

Surname

Forename

New Address (if known)

Postcode

Phone No.

Date of birth (DD/MM/YYYY) (if known)

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Tick this box if not known

National insurance number (if known)

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Tick this box if not known

Email

Relationship (if any) to person to be removed and reason why you are advising they should be removed

Signed

Date
