

Specimen Application Form

Parliamentary Election-05.08.2020

Application form to be sent by physically disabled persons to
use a vehicle under Section 83(4) (d) of
the Parliamentary Elections Act, No. 1 of 1981

To the Returning Officer of Electoral District.

01. Details of physically disabled person :-

(a) Full Name :-

(b) Postal Address :-

(c) Polling Division, Polling District and Serial Number (if known) as stated in the Electoral Register
:-

02. Brief Description of the physical disability :-

03. Name and address of the person, when the application is made on behalf of the physically disabled person :-

04. I am sending herewith a Medical Certificate of Government Medical Officer/ Registered or Assistant Medical Practitioner/ Ayurvedic Doctor/ Private Medical Practitioner

Name of the Medical Practitioner :-

Registration Number :-

05. I hereby declare that due to my physical disability/ the physical disability of the person mentioned above as described in paragraph 2, I am/ he is unable to convey myself/ himself on foot or by a service provided by the Sri Lanka Transport Board or the Sri Lanka Government Railway or by any other public transport, to the Polling Station.

06. I request to issue a permit be issued to me/ to the person who is subject to physical disability to use a vehicle to convey myself/ the person referred to above to the Polling Station to cast vote.

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Signature or Thumb Impression of the
physically disabled person/ or the
person who is making the application

Date :-