

SAMPLE PETITION

(pursuant to the *Municipal Government Act, RSA 2000, c. M-26*)

TO: THE COUNCIL OF THE VILLAGE of HALKIRK IN THE PROVINCE OF ALBERTA

THE UNDERSIGNED persons, being **electors** of the Village of Halkirk, in the Province of Alberta, hereby petition for/to:

<INSERT ACCURATE STATEMENT OF PURPOSE AND OBJECTIVES OF PETITION HERE>

EACH PETITIONER, by signing this petition certifies that he/she is an elector of the specialized municipality of Village of Halkirk.

The personal information contained in this petition will not be disclosed to anyone except the chief administrative officer and the chief administrative officer's delegates, if any, and will not be used for any purpose other than validating the petition.

Printed Surname and Given Name	Signature of Petitioner	Street Address or Legal Land Description	Telephone Number or Email Address, if any	I am an elector of this municipality ³	Date	Signature of Adult Witness ⁴
				<input type="checkbox"/> Yes <input type="checkbox"/> No		
				<input type="checkbox"/> Yes <input type="checkbox"/> No		
				<input type="checkbox"/> Yes <input type="checkbox"/> No		
				<input type="checkbox"/> Yes <input type="checkbox"/> No		
				<input type="checkbox"/> Yes <input type="checkbox"/> No		
				<input type="checkbox"/> Yes <input type="checkbox"/> No		

1. This form is a suggested form only for the information and convenience of interested individuals. It has no legislative effect. For certainty, legal advice should be sought when a petition is being considered.
2. If more than one page is needed to collect the required number of signatures, each page should contain a header identical to the one on this page, and pages are to be numbered
3. Each petitioner shall indicate that they are an eligible elector of the municipality by checking this field. An eligible elector is a Canadian citizen, over 18 years of age, and a resident of Strathcona County (see section 47 of the *Local Authorities Election Act* for further information)
4. Attach all Affidavits of Execution of Witness
5. Attach Statement of Representative