



Important Notes:

1. The front page of completed nomination forms are required to be available for public inspection at the Elections Office, Ground Floor, Te Hononga Christchurch City Council Civic Offices, 53 Hereford Street, Christchurch.
2. Candidate name, email address and/or phone number details as provided in Section B will be made available from the council's website.
3. In this form LEA = Local Electoral Act 2001 and LER = Local Electoral Regulations 2001

A TE ROHE PŌTI | ELECTION AREA

I wish to stand for election as **Mayor** of **Christchurch City**.

My principal place of residence
(tick **ONE** circle):

☐ is **WITHIN** the Christchurch City
Council area

☐ is **NOT WITHIN** the Christchurch
City Council area

B MĀ TE KAITONO | CANDIDATE TO FILL OUT (after reading important information on reverse)

I (candidate's full name),

accept the nomination and confirm that I have read and understand the **Eligibility and Candidacy Notes** on the reverse of this form and certify that I am qualified to be a candidate under Section 25 of the LEA and the LER and that I am not disqualified under Section 58 of the LEA. In particular, I am a New Zealand citizen and a New Zealand parliamentary elector.

Contact details (will be made available for public inspection):

Phone No.:

Email Address:

I am also standing for the following elections:

I wish my name to be shown on the voting document as:

I wish to use the following affiliation (to be left blank if the candidate does not wish to use any party / group affiliation. A candidate with no affiliation may request that 'independent' be shown. Maximum length is 38 characters (including any spaces between words)):

Signature:

Date:

C MĀ TE KAITAUTOKO | NOMINATORS TO FILL OUT

We, the undersigned electors of the Christchurch City Council hereby nominate the candidate listed in **Section B** above with their consent, as a candidate for the office of **Mayor**, the election for which is to be held on 11 October 2025.

Full name of First Nominator:

Residential Address:

Phone No.:

Signature of First Nominator:

Full name of Second Nominator:

Residential Address:

Phone No.:

Signature of Second Nominator:

Nominations must be in the hands of the Electoral Officer before 12 noon on Friday 1 August 2025

All nomination documents must be submitted at the same time.

For assistance phone (03) 941 8581 or email nominations@ccc.govt.nz

D CANDIDATE CONTACT DETAILS FOR THE ELECTORAL OFFICER/OFFICIAL

These contact details will not be made public and will be used for election communication by the Electoral Officer/Official:

Residential Address:

(For the following 2 fields only complete if different from details listed in Section B of this form):

Phone No.:

Email Address:

ELIGIBILITY & CANDIDACY NOTES

- 1 Candidates for this position do not need to live within the Christchurch City Council election area, but must be a New Zealand citizen and enrolled as a New Zealand parliamentary elector.
- 2 Both nominators must be enrolled as electors of Christchurch City Council.
- 3 No person can be elected to a local authority if they are concerned or interested in contracts over \$25,000 with that local authority. This restriction is waived if prior approval from the office of the Controller and Auditor-General is obtained (*Section 3(1) Local Authorities (Members' Interests) Act 1968*).
- 4 A candidate may stand for either the regional council or city/district council/community board in the regional council's district, but not both.
- 5 A candidate cannot nominate themselves for office.
- 6 A candidate may under Section 56 of the LEA be nominated under a name which the candidate is commonly known as provided that the name will not: cause offence to a reasonable person; be unreasonably long; include or resemble an official rank or title; cause confusion or mislead electors (Section 56 of the LEA).
- 7 Where no affiliation is claimed, or an affiliation is disallowed by the Electoral Officer under Section 57 of the LEA, nothing will be shown in the public notice or the voting paper alongside the candidate's name. A candidate with no affiliation may request that 'Independent' be shown.
- 8 Under Section 121 of the LEA, any person is liable to a fine of up to \$2,000 who:
 - (a) Knowing themselves to be ineligible for election, consents to being nominated for election; or
 - (b) Nominates any person as a candidate whom they know to be ineligible for election; or
 - (c) Not being the candidate signs any nomination paper knowing that they are not qualified to vote at the election.
- 9 Each nomination must be accompanied by the required deposit of \$200.00 (GST inclusive) or proof of an electronic deposit.
- 10 Evidence of NZ citizenship is required at the time of candidate nomination. Acceptable evidence includes a copy of a NZ passport, NZ birth certificate or NZ citizenship documentation.
- 11 Nominations of candidates must be in the hands of the Electoral Officer, Christchurch City Council, before 12 noon on Friday 1 August 2025.
- 12 An employee of a local authority may stand for election as mayor or councillor of that local authority, but if elected, must resign as an employee of the local authority before taking office. This provision does not apply to an employee of a local authority elected to a community or local board.

RETURN, PAYMENT AND REFUND DETAILS

I submit with this nomination
(please tick appropriate circles):



Evidence of
NZ citizenship



Evidence of
deposit



Photo



Profile
statement

I understand that if I do not provide a profile or photo, the words "Profile/Photo not supplied" will appear below my name in the profile booklet that will be sent out with the voting paper.

Deliver to (do not post):

Elections Office, Ground Floor, Te Hononga Christchurch City Council Civic Offices,
53 Hereford Street, Christchurch.

Or, scan and email to:

nominations@ccc.govt.nz

Payments can be made by **cash** or **eftpos** directly at the Christchurch City Council office at 53 Hereford St, Christchurch, if you are returning this form by hand or by **online banking** using the details provided below:

Account name:	Christchurch City Council	Bank:	BNZ
Account number:	02 0800 0044765-00	Particulars/reference:	Election Fee
Code:	(Your initials and surname)		

Refunds of Nomination Deposits

Where eligible, refunds of nomination deposits will be made by online deposit into your nominated bank account. Please provide either a bank deposit slip or verification of your bank account for the processing of your refund. Verification can be a screen shot from online banking or from the top of a bank statement, and must include the bank logo, the account name and the bank a/c number.

ELECTORAL OFFICIAL TO FILL OUT

Received at the hour of:		on the		day of		20	
Candidate roll #:							
First nominator roll #:				Second nominator roll #:			
Nomination documents approved:	<input type="radio"/> Nomination paper	<input type="radio"/> Deposit/proof of deposit	<input type="radio"/> Place of residence				
	<input type="radio"/> Photo	<input type="radio"/> Profile statement	<input type="radio"/> Proof of NZ citizenship				
	<input type="radio"/> Standing for other elections	<input type="radio"/> Deposit refund verification					
Signature of Electoral Official:						Date:	