

REGISTER TO VOTE

**You may register here at the township hall;
3525 Byron Rd, Howell, MI 48855,**

Any Township Office,

Any Secretary of State Office,

The Michigan Secretary of State's website at <https://webapps.sos.state.mi.us/mivote/> can look up your voter registration. Just fill in your name and date of birth.

OR

Copy, complete and return the form below.

State of Michigan Voter Registration Application

and Michigan Driver License/Personal Identification Card Address Change Form

- 1 answer**
- Are you a citizen of the United States of America? Yes No
- Will you be 18 years of age on or before election day? Yes No

➤ If you responded **No** to either of these questions, do **NOT** complete this form.

2 complete application

Last Name _____ First Name _____ Middle Name _____

Address where you live — house number and street/road _____ Apt. No./Lot No. _____

City _____ Zip Code _____ Telephone *optional* _____

MI

If you do not have a house or street address, describe location where you live — cross streets or roads, landmarks, etc. _____

City *or* Township where you live _____ County where you live _____ School District *if known* _____

Mailing Address *if different* For use on Driver License/Personal ID and Voter Registration For use on Voter Registration only _____

Date of Birth _____ Male Female _____

ID Number *check applicable box and provide appropriate number* _____

- I have a state issued driver license or personal ID card # _____ State _____
- I do not have a state issued driver license or personal ID card. The last four digits of my Social Security Number are _____
- I do not have a state issued driver license, a state issued personal ID card or a Social Security Number.
An ID number will be assigned to you for voter registration purposes.

Are you still registered to vote at your last address? Yes No Don't Know *If "Yes" or "Don't Know" enter previous address* _____

Previous Street Address _____ City *or* Township of _____ County _____

State _____ Zip Code _____ Registered under name of *if different than above* _____

3 read, sign and date

I certify that:

- I am a citizen of the United States.
- I am a resident of the State of Michigan and will be at least a 30-day resident of my city or township by election day.
- I will be at least 18 years of age by election day.
- I authorize cancellation of any previous registration.
- The information I have provided is true to the best of my knowledge under penalty of perjury. If I have provided false information, I may be subject to a fine or imprisonment or both under federal or state laws.

X _____	Date _____
Signature of Applicant	
X _____	Date _____
Signature of Applicant	

Sign and date both spaces provided above.

BEFORE MAILING, REMOVE TAPE AND FOLD IN HALF TO SEAL CLOSED.

Mail this completed form back to:
Howell Township, Election Dept. 3525 Byron Rd., Howell, MI 48855