

ELECTIONS CANADA

Form Reference: EC-PS-2025-002

FACILITY ASSESSMENT

Building Owner/Contact:

POLLING STATION ESTABLISHMENT AUTHORIZATION

Date Prepared:					
Electoral Event: ☐ Federal Election ☐ By-Election ☐ Referendum					
POLLING STATIO	ON INFORMATION				
Polling Station Number:	Division Number:	_			
Electoral District:					
Station Type: ☐ Regular Pollin Special Ballot Office	ng Station Advance Polling Station Mobile P	olling Station □			
Proposed Location Name: _					
Complete Address: Street:					
	ce: Postal Code:				
GPS Coordinates: Latitude: _	Longitude:				

FIIOIIE EIIId	II:
Available Dates: From:	To:
Operating Hours:	
Room/Space Details:	
Primary Voting Area:	
Secondary Space (if required)	uired):
Storage Area:	
Capacity Assessment:	
Registered Voters:	
• Expected Turnout:	%
 Voting Booths Required: 	
Accessibility Features:	AND COMPLIANCE
Accessibility Features: Wheelchair Accessible Entra Level Entry or Ramp Wide	AND COMPLIANCE ance Accessible Parking Accessible Washrooms Doorways Elevator Access (if multi-level) Booth Audio Assistance Available
Accessibility Features: Wheelchair Accessible Entra Level Entry or Ramp Wide	ance □ Accessible Parking □ Accessible Washrooms e Doorways □ Elevator Access (if multi-level)
Accessibility Features: Wheelchair Accessible Entra Level Entry or Ramp Wide Designated Accessible Votir Safety and Security:	ance □ Accessible Parking □ Accessible Washrooms e Doorways □ Elevator Access (if multi-level)
Accessibility Features: Wheelchair Accessible Entra Level Entry or Ramp Wide Designated Accessible Votin Safety and Security: Adequate Lighting Fire Sa	ance Accessible Parking Accessible Washrooms Doorways Elevator Access (if multi-level) Booth Audio Assistance Available
Accessibility Features: Wheelchair Accessible Entra Level Entry or Ramp Wide Designated Accessible Votin Safety and Security: Adequate Lighting Fire Sa	ance Accessible Parking Accessible Washrooms Doorways Elevator Access (if multi-level) Booth Audio Assistance Available Afety Compliance Emergency Exits Clearly Marked
Accessibility Features: Wheelchair Accessible Entra Level Entry or Ramp Wide Designated Accessible Votin Safety and Security: Adequate Lighting Fire Sa Security System Available Utilities and Services:	ance Accessible Parking Accessible Washrooms Doorways Elevator Access (if multi-level) Booth Audio Assistance Available Afety Compliance Emergency Exits Clearly Marked
Accessibility Features: Wheelchair Accessible Entra Level Entry or Ramp Wide Designated Accessible Votin Safety and Security: Adequate Lighting Fire Sa Security System Available Utilities and Services: Electrical Supply Adequate	ance Accessible Parking Accessible Washrooms Doorways Elevator Access (if multi-level) Booth Audio Assistance Available Afety Compliance Emergency Exits Clearly Marked Secure Storage for Ballots CCTV System

AUTHORIZATION SIGNATURES

SECTION A - SITE ASSESSMENT OFFICER

I have conducted a thorough assessment of the proposed polling station location and certify that it meets all Elections Canada requirements for accessibility, security, and operational functionality.

Assessment Officer Na	ame:		
Employee ID:	Date of Assessment:	!	
Signature:		Date:	
Assessment Notes:			
SECTION B - F	IELD LIAISON OFFI	CER APPROVAL	
I have reviewed the site station for the specified		this location is suitable for use as a polling	
Field Liaison Officer N	ame:		
Region:			
Signature:		Date:	
SECTION C - A	SSISTANT RETURN	IING OFFICER VERIFICATION	λC
I verify that all logistical proposed.	requirements have been met a	and this polling station can be established a	S
Assistant Returning O	fficer Name:		
Electoral District:			
Ciana atoma		Data	

SECTION D - RETURNING OFFICER AUTHORIZATION

I hereby authorize the establishment of this polling station for the specified electoral event, subject to all conditions and requirements outlined herein.

Returning Officer Name:
Electoral District:
Signature: Date:
Official Seal: [ELECTIONS CANADA OFFICIAL SEAL]
SPECIAL CONDITIONS AND REQUIREMENTS
Facility Use Agreement: □ Signed □ Pending □ Not Required
Insurance Coverage: ☐ Confirmed ☐ Pending ☐ Waiver Required
Special Instructions:
Equipment Requirements:
□ Voting Booths (Qty:) □ Tables (Qty:) □ Chairs (Qty:)
□ Ballot Boxes □ Signage □ Privacy Screens □ Generator □ Extension Cords
Staffing Assignment:
Deputy Returning Officer:
• Poll Clerk:
Information Officer:

POST-AUTHORIZATION CHECKLIST

Setup Inspection: Completed Date:	Inspector:
Final Approval: Granted Date:	Approver:
Issues/Concerns:	
Authorization Valid From: To	o:
Form Completion Date:	
Reference Number: EC-PS-2025	
This authorization is specific to the electoral ever re-authorization.	ent and location detailed above. Any changes require
Elections Canada Élections Canada	
Serving Democracy Au service de la démo	cratie
Distribution:	
 □ Returning Officer □ Assistant Returning Office Owner 	cer □ Field Operations □ Central Registry □ Facility