



**CANDIDATE FILING FORM AND  
NOMINEE'S CERTIFICATE OF ELIGIBILITY TO SERVE  
ON THE TOWN COUNCIL OF FENWICK ISLAND, DELAWARE**

Fill out statement (1) or (2) below, *whichever is applicable to you.*

**(1) RESIDENT:**

I, \_\_\_\_\_, (NAME)

of \_\_\_\_\_, Fenwick Island DE 19944, a nominee for election to the Town Council of Fenwick Island, hereby state that I am a natural person, a citizen of the United States, a resident of the Town of Fenwick Island, Delaware, since \_\_\_\_\_ (date), and am or will be twenty-one (21) years of age on or before the date of the election, I have no other voting residency for municipal elections and that I have been qualified to vote in the Town of Fenwick Island, Delaware for at least one year prior to the election for which I am nominated. I am registered to vote pursuant to Town regulations.

Signed and certified on this the \_\_\_\_\_ day of \_\_\_\_\_, 20

\_\_\_\_\_  
(Signature of nominee)

State of \_\_\_\_\_

County of \_\_\_\_\_

Be it remembered, that on the day and year aforesaid \_\_\_\_\_  
(Name) personally appeared before me, a Notary Public of the aforesaid State and County, and acknowledged that the above signature was his/her act and deed.

\_\_\_\_\_  
(Notary Public) (seal)

My Commission Expires: \_\_\_\_\_

**(2) NON-RESIDENT PROPERTY OWNER:**

I, \_\_\_\_\_, (NAME)

of \_\_\_\_\_, (ADDRESS) a nominee for election to the Town Council of Fenwick Island, hereby state that I am a natural person, a citizen of the United States, a property owner in the Town of Fenwick Island, Delaware, and am or will be twenty-one (21) years of age on or before the date of the election, and that I have been qualified to vote in the Town of

Fenwick Island, Delaware for at least one year prior to the election for which I am nominated. I am a freeholder of property located in the town of Fenwick Island, Delaware, as shown on Map No. \_\_\_\_\_, Parcel No. \_\_\_\_\_ and Lot No(s). \_\_\_\_\_ in the latest Sussex County Assessment Office. I am registered to vote pursuant to Town regulations.

Signed and certified on this the \_\_\_\_\_ day of \_\_\_\_\_, 20

\_\_\_\_\_  
(Signature of nominee)

State of \_\_\_\_\_

County of \_\_\_\_\_

Be it remembered, that on the day and year aforesaid \_\_\_\_\_  
(Name) personally appeared before me, a Notary Public of the aforesaid State and County, and acknowledged that the above signature was his/her act and deed.

\_\_\_\_\_  
(Notary Public) (seal)

My Commission Expires: \_\_\_\_\_