

SECTION 1

Date

I / We

the proprietor(s) of lot(s) in Community Precinct Neighbourhood Association

Deposited Plan No: appoint

of

as my/our proxy for the purposes of meetings of the Association *(including adjournments of meetings)*.

SECTION 2

Period or number of meetings for which appointment of proxy has effect 1 meeting / ___ meetings / 1 month / ___ months / 12 months or 2 consecutive annual general meetings

**Tick or tick and complete whichever applies*

(Note. The appointment cannot have effect for more than 12 months or 2 consecutive annual general meetings, whichever is the greater, unless revoked sooner).

SECTION 3

1. This form authorises the proxy to vote on my / our behalf on all matters.

OR

2. This form authorises the proxy to vote on my / our behalf on the following matters only:

[Specify the matters and any limitations on the manner in which you want the proxy to vote.]

**Select option 1 or 2, whichever applies.*

SECTION 4

Signature of proprietor/s

Signature of proxy

Notes

1. This form does not authorise voting on a matter if the person appointing the proxy is present at the meeting and votes on the matter.
2. This form is ineffective unless it is given to the secretary of the Association at or before the first meeting in relation to which it is to operate and it contains the date on which it was made.
3. This form will be revoked by a later proxy appointment form delivered to the secretary of the Association in the manner described in the preceding paragraph.