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|  | | | **Ministry of Government and Consumer Services** |  | | **Proxy Form** | |
| This is a prescribed form, and accordingly it may not be substantively changed.  You can delete portions of the form that are not relevant or don’t apply in a particular case.  You can also add words or clarifications, as reasonably required. But you must retain the substance and general format of the form. | | | | | | | **Instructions**  This form can be filled out electronically and then saved or printed. The blank form can also be printed in full, and then filled out in hard copy. If you are filling out the form in hard copy and you need more space, you may enclose additional sheets of paper with the form. |
| To: ***Insert condominium corporation’s name in this box:***  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CONDOMINIUM CORPORATION No. \_\_\_\_** | | | | | | | ***Insert your name in this box:*** |
| ***\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***  **NAME OF PROXY GIVER *-*** i.e. the person entitled to vote at the meeting, for example, the registered owner or mortgagee |
| I am (we are) ***[Select the box below that describes you]:***  **☐ the registered owner(s)**  **☐ authorized to act on behalf of the registered owner(s)**  **☐ the mortgagee(s)**  **☐ authorized to act on behalf of the mortgagee(s)** | | | | | | | **Instruction for person filling out the form:** In the case of a corporation, affix the corporate seal or attach a statement that the person(s) signing have the authority to bind the corporation. If you are authorized to act on behalf of the registered owner(s) or mortgagee(s), attach a copy of the document that gives you this authorization. |
| **ADDRESS - Instruction for person filling out the proxy form:** Insert the address of the unit in the box to the right. If your corporation is a common elements condominium corporation, insert the address of the relevant parcel of tied land (and of course no unit number). | | | | | | | ***Insert Unit’s address and unit number in this box:***  **Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Unit \_\_\_\_\_\_\_, Level \_\_\_\_\_\_\_\_** |
| **Dated this \_\_\_\_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_.**  **Day Month**  **at \_\_\_\_\_\_\_\_\_  a.m.  p.m.**  **Time of Day** | | | | | | | ***Proxy Giver’s Signature:*** |
| ***X \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*** |
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| Date of Meeting:  the \_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_  **I (we) appoint the proxy named in row A below, or, failing him or her, the proxy named in row B below, to attend and vote on my (our) behalf at the meeting of owners to be held on the date noted above, and at any adjournment of the meeting.** | | | | | | |  |
| ***Name of Person appointed as Proxy:*** | | | | | | | ***Signature or initials of Proxy Giver:*** |
| A. | | | | | | | X |
| B. THE SECRETARY OF THE CONDOMINIUM CORPORATION | | | | | | | X |
|  | | | | | | |  |
| **I (we) revoke all proxies previously given.** | | | | | | |  |
| ***Select one of the three boxes below. Also initial or sign to the right of your selection.*** | | | | | | |  |
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| **Proxy not authorized to vote – but Proxy’s attendance counts towards Quorum**  The proxy is NOT authorized to vote on my (our) behalf with respect to any matter at the meeting, including matters of routine procedure. **Instruction for person filling out this form:**  Check this box if you are appointing the proxy only to count towards quorum. If this box is checked, then the rest of the form should **not** be filled out.  **Proxy Authorized Only to Attend Meeting and Vote on Procedural Matters**  The proxy may vote on my (our) behalf only with respect to matters of routine procedure at the meeting, and no other matters, as I (we) could do if personally present at the meeting. **Instruction for person filling out this form:** Check this box if you are appointing the proxy to vote only on matters of routine procedure, and no other matters. If this box is checked, then the rest of the form should **not** be filled out. | | | | | | | **Signature or initials of Proxy Giver** |
| **Signature or initials of Proxy Giver** |
| **Proxy Authorized to Vote on All Matters – Proxy has discretion (as to how to vote) unless specific voting instructions are provided below**  The proxy may nominate candidates or may vote on my (our) behalf with respect to all matters that may come before the meeting, subject to my instructions set out below, as I (we) could do if personally present at the meeting. **Instruction for person filling out this form:** If this box is checked and you do not provide instructions with respect to any part of the rest of this form, you are giving your proxy the authority to nominate any candidates or vote in any manner with respect to that part of the form, as you could do if you were personally present at the meeting. | | | | | | | X  **Signature or initials of Proxy Giver** |
| **SPECIFIC VOTING INSTRUCTIONS [Use the following sections if you wish to give specific voting instructions to your appointed proxy.]** | | | | | | | |
| 1. **Voting to elect candidates to vacant positions on the board that all owners may vote for:**   I/we instruct the proxy to nominate, if necessary, and to vote **ONLY for the candidates named below and in the order set out below**. | | | | | | |  |
| **Order of vote**  **(enter 1,2,3, etc.)** | **Candidates for the Position(s) on the Board** | | | | | | **Signature or initials of Proxy Giver** |
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| Instruction to person filling out the form: Your proxy may only vote for individuals whose names are set out above and who, at the time of the vote, are candidates. If you list more names than positions available on the board of directors, your proxy will vote in the order set out above up to the number of positions that are available. | | | | | | |  |
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| 1. **Voting to elect candidates to any vacant position on the board that only owners of owner-occupied units may vote for:**   I (we) instruct the proxy to nominate, if necessary, and to vote **only for the candidat(s) named below and in the order set out below for the position on the board for which only owners of owner-occupied units may vote under s. 51(6) of the *Condominium Act, 1998.*** | | | | | | |  |
| **Order of vote**  **(enter 1,2,3, etc.)** | | **Candidates for the Position(s) on the Board** | | | | | **Signature or initials of Proxy Giver** |
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| **Instruction to person filling out the form:** Your proxy may only vote for individuals whose names are set out above and who, at the time of the vote, are candidates. If you list more names than positions available on the board of directors, your proxy will vote in the order set out above up to the number of positions that are available. | | | | | | |  |
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| 1. **Voting for specific matters:**   I (we) instruct the proxy to vote as indicated below with respect to the specified matters that may come before the meeting, subject to any instructions set out below, as I (we) could do if personally present at the meeting. | | | | | | |  |
| **Specific Matter** | | | | | **In Favour** | | **Signature or Initials of Proxy Giver** |
| APPROVAL OF AGENDA FOR MEETING (Order of business only. No new items not in Notice of Meeting can be added to agenda) | | | | | Yes  No | | X\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| APPOINTMENT OF FOLLOWING PERSONS TO ACT AS SCRUTINEERS FOR MEETING:  (LIST) | | | | | Yes  No | | X\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| APPROVAL OF MINUTES OF PREVIOUS YEAR’S AGM | | | | | Yes  No  **(with any amendments approved at the meeting)** | | X\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| re-appointing the auditor for the current fiscal year, with the auditor’s remuneration to be fixed by the Board | | | | | Yes  No | | X\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| confirming By-law \_\_\_, with all amendments approved at the meeting | | | | | Yes  No  **(with any amendments approved at the meeting)** | | X\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| PASSING the proposed Rules presented at the meeting, with all amendments approved at the meeting | | | | | Yes  No  **(with any amendments approved at the meeting)** | | X\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
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