



TOWN OF ORLEANS

19 SCHOOL ROAD ORLEANS MASSACHUSETTS 02653-3699
Telephone (508) 240-3700 ---- Fax (508) 240-3703
<http://www.town.orleans.ma.us>

SELECT
BOARD

TOWN
ADMINISTRATOR

OCTOBER 2022 SPECIAL TOWN MEETING PETITION PROCEDURES

1. Please use the fillable form template as a guide for drafting your petition. The wording at the top of the petition MUST BE exactly as you would like it to appear on the warrant.
2. Submit an electronic copy, using the fillable form or typed in MS Word, of the draft petition to, townadministrator@town.orleans.ma.us. The draft petition language will then be reviewed by Town Counsel as to legal form. Please allow up to a week for this process. Once reviewed, it will be emailed back to you attached to the official signature sheet for the collection of signatures.
**Please do not attempt to collect signatures until your petition language has been reviewed and sent back to you.*
3. During the collection of signatures, each signature page used MUST HAVE the identical petition language at the top.
4. Each signature should include the name, phone number, and/or email address of the contact person.
5. Written petition articles for the *Special Town Meeting* must contain the signatures of no fewer than one hundred (100) registered voters of the town.
5. Obtain more signatures than the minimum required. Signatures may be disqualified by the Town Clerk's Office for the following reasons: illegible, no residential address, and/or signer not being on the current voter registration list.
7. The Warrant for the *Special Town Meeting* opens on August 18, 2022 at 8:30 a.m. and closes on September 2, 2022 at 4:30 p.m. Your final petition with signatures must be delivered to the Town Administrator/Select Board office on or before September 2, 2022 at 4:30 p.m.
8. If requested, a proponent of the petition may be asked to appear at a Finance Committee and/or Select Board meeting to answer questions on the article and will also be required to present the article at the Town Meeting.

Petition the Town of Orleans

To see if the Town will vote to:

Contact name: _____

Contact at: _____

Date Petition Submitted: _____

Print Name	Signature	Residence Address-Not Mailing
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2.		
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