



# TOWNSHIP OF WHITEHALL



## MOVING PERMIT

OFFICE OF THE TREASURER

**FEE \$5.00 – PAYABLE TO WHITEHALL TOWNSHIP TREASURER**

DATE: \_\_\_\_\_

MOVING OUT \_\_\_\_\_

MOVING IN \_\_\_\_\_

MOVING WITHIN \_\_\_\_\_

1) NAME: \_\_\_\_\_ AGE: \_\_\_\_\_ SOCIAL SECURITY #: \_\_\_\_\_

EMPLOYER & EMPLOYER'S ADDRESS: \_\_\_\_\_

2) NAME: \_\_\_\_\_ AGE: \_\_\_\_\_ SOCIAL SECURITY #: \_\_\_\_\_

EMPLOYER & EMPLOYER'S ADDRESS: \_\_\_\_\_

3) NAME: \_\_\_\_\_ AGE: \_\_\_\_\_ SOCIAL SECURITY #: \_\_\_\_\_

EMPLOYER & EMPLOYER'S ADDRESS: \_\_\_\_\_

4) NAME: \_\_\_\_\_ AGE: \_\_\_\_\_ SOCIAL SECURITY #: \_\_\_\_\_

EMPLOYER & EMPLOYER'S ADDRESS: \_\_\_\_\_

5) NAME: \_\_\_\_\_ AGE: \_\_\_\_\_ SOCIAL SECURITY #: \_\_\_\_\_

EMPLOYER & EMPLOYER'S ADDRESS: \_\_\_\_\_

6) NAME: \_\_\_\_\_ AGE: \_\_\_\_\_ SOCIAL SECURITY #: \_\_\_\_\_

EMPLOYER & EMPLOYER'S ADDRESS: \_\_\_\_\_

**(NOTE: Social Security numbers are not required for children under 18 years of age)**

MOVING FROM: \_\_\_\_\_

MOVING TO: \_\_\_\_\_

DATE OF MOVE: \_\_\_\_\_

APPLICANT'S SIGNATURE: \_\_\_\_\_

The above person or persons are aware that Whitehall Township, Ordinance No. 736 provides that furnishing of false information shall upon conviction, be liable for penalties set up in the Ordinance.

### FOR TOWNSHIP USE ONLY

PER CAPITA - ACCOUNT # \_\_\_\_\_ PAID: YES NO (CIRCLE ONE) DATE \_\_\_\_\_

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ADOPTED 12/2008