Town of Westwood Town Clerk 580 High Street IMP

Westwood, MA 02090-1607

Resident Address:

DOG 4 Name:

TOWN OF WESTWOOD

IMPORTANT LEGAL DOCUMENT ANNUAL STREET LISTING

2016

IMPORTANT: General Laws of Massachusetts mandate an annual street listing of residents as of January 1 each year. Update the information provided by adding, deleting, or making changes below the printed information. Please sign and respond within ten (10) days, even if no changes are necessary. For assistance, call **TOWN CLERK AT 781-326-3964**

← If this address is incorrect, make corrections below

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		NAME		To	r M/F	Date of Birth	Occupation	ed	Nationality (If not U.S. citizen)	U.S. Veteran	
Voter	Last	First	Middle	Mail To	Gender	mm/dd/yyyy		1 - Moved - Deceased		S. V	Public Safety
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Signed	l under the Penalties	of Perjury as Prescribe	d by M.G.L. 56, §4				MARCH 1, 2016 APRIL 26, 2016		- ANNUAL TOV	/N EL	ECTION
							MAY 2, 2016 NOVEMBER 8, 2016				
							NOVEMBER 14, 2010				OWN MEETING subject to change)
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				ent ra	bies v	accine certificate	1/1/2016 - 3/31/2016) showing expiration date an				
		self-addressed stam 990. If you're unsur					o the Town of Westwood fo office.	or the a	ppropriate license	fee to	: Town Clerk, 580 High
							GO TO THE FOLLOV ex.cfm/page/Dog-licens				
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		dress/Phone:		Bree	d:		Color:		Age:_		
DO	G 2 Name:		Breed:				Color:		Age:_		
DO	G 3 Name:		Breed:				Color:		Age:		

Color:

Town bylaw imposes a \$ 25.00 late fee per dog on licenses issued on or after 4/1/2016. Ownership of more than 4 dogs reguires a kennel license. Please contact the Town

Breed:

clerk with any questions regarding kennel or dog licensing at (781) 326-3964.

Age:

TOWN OF WESTWOOD - SPECIAL INSTRUCTIONS: RETURN WITHIN TEN (10) DAYS

COMPLIANCE with this State requirement provides proof of residence, protection of voting rights, veteran's bonus, housing for the elderly and related benefits as well as providing information for your community. This form DOES NOT register you as a voter, or allow you to change your political party. To register or change party, contact the Town Clerk at (781) 326-3964. You must register at least twenty (20) days prior to Federal, State, and Town Elections in order to vote.

GENERAL INSTRUCTIONS: PLEASE PRINT

Please verify and/or complete all information listed on this form, then sign and date it. Make corrections as necessary.

- 1. **RESIDENT ADDRESS** If your resident address is incorrect, make the change in the space to the right of the incorrect address.
- 2. **PHONE NUMBER** Please print and/or verify your phone number in the indicated space. If unlisted, put an "X" in the box next to the word "Unlisted".
- 3. **DELETIONS** Put a line through the name of any resident no longer residing at this address and list his/her new address. Use the blank lines at the bottom of the form to make any changes.
- 4. **POLITICAL PARTY** "R" for REPUBLICAN, "D" FOR DEMOCRAT, "and "U" FOR UNENROLLED. All other letters represent political party designations. This reflects the information on file and can only be updated by completing the necessary voter registration or party enrollment change form.
- 5. **NAMES OF ALL FAMILY / HOUSEHOLD MEMBERS AT THIS ADDRESS** Includes any member of the family in Military Service, away at school or confined to a rest home. If a NEW member has been added to the family or household, enter the name and information in the space provided on the form.
- 6. **MAIL TO** This is the designated individual to whom this form has been sent. If you wish to change your designated mail to contact, please place a "Y" next to the name of the selected individual. ONLY ONE "HEAD OF HOUSEHOLD" may be designated in order to have the entire family listed together.
- 7. **GENDER M/F** Should be "M" for Male or "F" for Female
- 8. **DATE OF BIRTH** "MM = Month, DD = Day, YYYY = Year." If your date of birth is blank or incorrect, please make appropriate changes.
- 9. **OCCUPATION** Enter occupation, not place of employment.
- 10. MOVED/DECEASED If this person has moved or is deceased, please indicate with an "M" or "D".
- 11. **NATIONALITY** If you are NOT a U.S. Citizen, please indicate your nationality.
- 12. **PUBLIC SAFETY** Check this box if you are a member of a public safety agency and WORK AND LIVE IN THIS COMMUNITY.
- 13. NO. OF DOGS Number of dogs licensed to this individual.
- 14. **VETERAN** Write a "Y" if you are a veteran of the U.S. Armed Forces.

IF YOU HAVE ANY QUESTIONS, PLEASE CALL THE TOWN CLERK AT (781) 326-3964

To return this form

Refold, insert into the provided return envelope and mail

Thank you for your cooperation

REMINDERS

AVOID FINES---LICENSE YOUR DOG ON TIME!
TOWN BYLAW STATES THAT THE DOG OFFICER SHALL
IMPOUND ANY DOG FOUND AT LARGE.