Town of Westwood Town Clerk 580 High Street

Westwood, MA 02090-1607

TOWN OF WESTWOOD

IMPORTANT LEGAL DOCUMENT ANNUAL STREET LISTING

2018

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						ke c	corrections below
WA.	RNING:	YOU CAN SCAN AND RETURN THIS FORM BY E-MAIL TO: <u>census@town.westwood.ma.us</u> Failure to respond to this mailing for 2 consecutive years shall result in removal from the active voting list and may result in removal from the voter registration rolls. (MGL Ch. 51 Sec. 4[c]) Cell Phone #:									
		Home Phone #				_	E-mail:				
PLI	EASE PRIN	An asterisk * in the voter column indicates a registered voter. You cannot register to vote with this form.									
ır		NAME	M. 111	l To	Gender M/F	Date of Birth	Occupation	M - Moved D - Deceased	Nationality (If not U.S. citizen)	U.S. Veteran	
Voter	Last	First	Middle	Mail To	Gene	mm/dd/yyyy		M - M D - De		U.S.	Public Safety
							ENTER NUMBER O	F DOGS	:	,	
Signature of Respondent Signed under the Penalties of Perjury as Prescribed by M.G.L. 56, §4. APRIL 24, 2018 ANNUAL TOWN ELECTION MAY 7, 2018 ANNUAL TOWN MEETING SEPTEMBER 18, 2018STATE PRIMARY NOVEMBER 6, 2018STATE ELECTION NOVEMBER 12, 2018FALL TOWN MEETING (Tentative date per Town bylaws subject to change)											
See Reverse Side For More Detailed Instructions											
PLEASE DETACH BEFORE MAILING 2018 DOG LICENSE APPLICATION BY MAIL: DUE MARCH 31, 2018 (Registration Period is 1/1/2018 - 3/31/2018) Please detach and mail this form with (1) a copy of a current rabies vaccine certificate showing expiration date and proof of spaying/neutering (if applicable and not already on file); (2) a self-addressed stamped envelope; and (3) a check made payable to the Town of Westwood for the appropriate license fee to: Town Clerk, 580 High											
St, Westwood, MA 02090. If you're unsure of the fee, please contact the Town Clerk's office. FOR MORE INFORMATION AND ONLINE RENEWALS, PLEASE GO TO THE FOLLOWING LINK: http://www.townhall.westwood.ma.us/gov/depts/town_administration/tclerk/dog.htm Any person seventy (70) years of age or older, upon proof of age, shall be exempt from the annual license fee for one dog, per household, per											
		year per MG	L c. 140§139	(c) a	nd T	own bylaws §18	84-10, C, (2). All other	r licensii	ng provisions a	pply.	
FEES: Check One:Male \$15.00Neutered Male \$10.00Female \$15.00Spayed Female \$10.00 OwnersName/Address/Phone: DOG 1 Name: Breed: Color:Age:											
DO	G 2 Name:_			Bre	e d:		Color:		Age:_		
	G 3 Name:_		Breed:				Color:	Color:		Age:	

Town bylaw imposes a \$ 25.00 late fee per dog on licenses issued on or after 4/1/2018. Ownership of more than 4 dogs reguires a kennel license. Please contact the Town

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

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 selection of jurors.

This form DOES NOT register you as a voter, or allow you to change your political party.

You may register to vote in Massachusetts online at www.registertovotema.com.

GENERAL INSTRUCTIONS – PLEASE PRINT

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

- ➤ **RESIDENT ADDRESS** If your resident address is incorrect, make the change in the space to the right of the incorrect address.
- > CHANGES Make all changes on the shaded line below the printed line.
- > **DELETIONS** Put a line through the name of any resident no longer residing at this address and list his/her new address.
- VOTER Indicates whether a person is a registered voter. Returning your census keeps your voter status
 active.
- 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 & information in the space provide on the form.
- 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.
- **GENDER M/F** Should be "M" for Male or "F" for Female.
- **DATE OF BIRTH** MM=Month, DD=Day, YYYY=Year. If your date of birth is blank or incorrect, please make appropriate changes.
- OCCUPATION Enter or verify your occupation, not your place of employment.
- MOVED / DECEASED Place a "D" in the column to indicate the resident is Deceased. Place an "M" to indicate the resident has Moved. Please provide a new address if known for moved registered voters
- NATIONALITY If you are NOT a U. S. Citizen, please indicate/verify your nationality.
- **VETERAN** A "Y" indicates you are a veteran of the U. S. Armed Forces.