TOWN OF NAHANT

Town of Nahant Town Clerk's Office 334 Nahant Road Nahant, MA 01908

Resident Address:

IMPORTANT LEGAL DOCUMENT ANNUAL STREET LISTING

2024

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 781-581-0018 *17**

← If this address is incorrect, make corrections below

VA	RNING:		_				nall result in rem		
		voting list an	d may result	in re	emoval from	the voter registr	ation rolls. (MGI	Ch. 51 Sec. 4	[c])
	PLEASE BE	INFORMED TI				LIST MUST BE ON A 2024 PARKING	N FILE WITH THE T	OWN OF NAHAI	NT
PLI	EASE PRIN	T	iii onbei	•	1 01(01)/(02	7	orioiteit.		
		NAME		To	Date of Birth	Occupation	M - Moved D - Deceased (Complete Moved Section on Back of	Nationality (If not U.S. citizen)	
Voter	Last	First	Middle	Mail	mm/dd/yyyy		Form)		
									ı
						ENTER NUMBER	OF DOGS		
_	ature of Respo	ndent s of Perjury as Prescribe	Date d by M.G.L. 56, §4.		_		<u>—</u>		
Tel	ephone Numb	er:	O Un		in	0	and older must have censed with town po		
			See Rever	se S	Side for Mor	e Detailed Instru	ctions		
			MAIL IN	DOC	G REGISTRA	TION FORM			
							ppropriate license fe r dog's license(s) will		
NAN	ME/ADDRES	S/PHONE:						_	
DOC	G'S NAME		AG	E	COLOR	BR	EED		
NAN	ME OF VET: _				_RABIES EXP	IRATION DATE:			
СНЕ	CCK ONE:	MALE \$25.0	00NEUT	ERE	D MALE \$20.00	FEMALE \$2	25.00SPAYE	D FEMALE \$20.00)

** KENNEL FEE per MGL Chapter 140, SEC 137A available upon request. ACO Inspection required**

PLEASE 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
- VOTER Indicates whether a person is a registered voter. Returning your census keeps your voter status
- 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 provided 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.
- **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.

his/her new address.

active.

CHECK ONE:

MALE \$25.00

- 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 on the bottom of this form.
- 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.

*** Must be signed BY VOTER to be removed or provide new address. Clerk's Office will send a notice to registered voter. Thank you

*MOVED -- If a household member listed has moved, provide the following information.

MULEDE THEY MANYED TO

Cianatura lifa ragistarad

__SPAYED FEMALE \$20.00

WHERE IF	Signature (ii a registered		
Street Address	City/ Town	voter)	
_ AGE CO	DLOR	BREED	
RABIES			
NEUTERED MALE \$20	0.00FEMALE \$25.00	SPAYED FEMALE \$20.00	
AGE C	COLOR	BREED _	
	ADDITIONA AGE RABIES	ADDITIONAL DOGS: AGE	

__FEMALE \$25.00

____NEUTERED MALE \$20.00