

MOVING PERMIT FORM **PIN:** _____ **PERMIT#** _____
Polk Township, Monroe County, PA **TODAY'S DATE** _____

165 Polk Twp. Rd., PO Box 137, Kresgeville, PA 18333 Phone: 610-681-5376 Fax: 610-681-3063 **DATE MOVED OR MOVING** _____
**** Notify your employer of the PSD code 450203 **** zoning/codes office _____

PRINT!! Complete legal names of ALL OCCUPANTS, include children MOVING TO THE NEW ADDRESS on the lines below:

Names	Ages	Birthdates	Employer (if applicable)	Employer phone #	WHO WILL YOU USE FOR TRASH?								
					MOVING	RELOCATING	OVER 30 DAYS with	RELATIVE	FRIEND	TWP. HAULER	Write Hauler's Name Below:		
OUT-OF Polk	MOVING IN-TO Polk	INSIDE Polk	OWNER	RENTER	or	or	or	or					
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	or	<input type="checkbox"/>	
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	or	<input type="checkbox"/>	
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	or	<input type="checkbox"/>	
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	or	<input type="checkbox"/>	
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	or	<input type="checkbox"/>	
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	or	<input type="checkbox"/>	

OLD Address _____
NEW Address _____
If property is owned by someone else, list their name below. Please check the appropriate box
Their name: _____ Their phone #: _____

Applicant's Signature _____ **Phone #** _____
Applicant's Signature _____ **Phone #** _____
Applicant's Signature _____ **Phone #** _____
Applicant's Signature _____ **Phone #** _____

\$2.00

Applicant's Signature _____ **Phone #** _____ **Note Payment** _____