

Precinct _____

TOWN OF WINCHESTER RESIDENT CENSUS FORM

Check one: New Residents
 Address Change
 Within Town of Winchester

Date _____

ADDRESS: _____

PREVIOUS ADDRESS: _____

Number Unit Street

City/Town State Zip Code

Name (Last, First, MI)	Sex (M or F)	Date of Birth (Month/Day/Year)	Occupation	Citizenship (Country)	Voter (Yes or No)

NUMBER OF DOGS IN HOUSEHOLD: _____

(Dogs must be licensed **each year**. Dog license applications are available at the Town Clerk’s Office.)

PREVIOUS RESIDENTS AT THIS ADDRESS:

Unknown Moved out of town Still in Winchester _____
(address if known)

The above information will enable the Town to update census records as required by state law. Compliance provides proof of residency, protects certain residency rights such as transfer station permits, various elderly and veterans’ benefits and provides information for the selection of jurors. The information also enables the Town to project school and public safety requirements.

Signature of Informant Telephone Number Check if unlisted