

PROPERTY OWNER CENSUS FORM

COMPLETE THIS SECTION FOR NEW HOMES ONLY

LOT NUMBER _____

BUILDING PERMIT NUMBER _____

OCCUPANCY PERMIT NUMBER _____

NAME OF DEVELOPMENT (IF APPLICABLE) _____

TOWNSHIP OF INDIANA
3710 Saxonburg Boulevard
Pittsburgh, PA 15238
 (412) 767-5333
 (412) 767-4705 (Fax)

NAME OF OWNER(S): _____

ADDRESS: _____

TELEPHONE NO. _____

EFFECTIVE DATE OF RESIDENCY: _____

PREVIOUS OWNER, if applicable: _____

FILING THIS FORM WITHIN THIRTY (30) DAYS OF OCCUPANCY IS A REQUIREMENT OF ORDINANCE NO. 287-VIOLATORS WILL BE FINED

COMPLETE THE INFORMATION BELOW FOR EACH PERSON WHO WILL RESIDE AT THIS ADDRESS

<u>FULL NAME</u>	<u>AGE</u>	<u>SOCIAL SECURITY NO.</u>	<u>NAME OF EMPLOYER*</u>	<u>ADDRESS OF EMPLOYER</u>	<u>PHONE NO.</u>	SELF-EMPLOYED OR INDEPENDENT CONTRACTOR?	
						<u>YES</u>	<u>NO</u>
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
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_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____

*IF SELF EMPLOYED LIST FIRM NAME AND ADDRESS

UNDER PENALTY OF LAW, I/WE CERTIFY THAT THE ABOVE INFORMATION IS CORRECT
THIS FORM MUST BE SIGNED BY ALL PROPERTY OWNERS

SIGNATURE _____

SIGNATURE _____