

Borough of Avalon Office of Census Enumerator 640 California Ave. Avalon, PA 15202

CENSUS / OCCUPANCY REPORT

Pursuant to Ordinances No. 1165 and No. 1273: Residents and Landlords of Avalon Borough are required to file an Occupancy Report on or before May 31 of each year, and at any time in which there is a change in the occupancy (moving in/moving out) of a residential premises.

Dear Resident/Landlord:

Please complete this Census Report. List all residents living in the residence/home. If you have any questions please call (412) 761-5820 ext. 1003 or census@boroughofavalon.org. If you previously received this form through the 2018 Landlord/Tenant Registration, please disregard this form. Thank you.

| NAME | | | BIRTH DATE |
|-------------------------|------------------|----------------------------|---------------------------------|
| (last) | (first) | (m.i.) | BIRTH DATE (month / day / year) |
| SPOUSE/ROOMMATE | | | BIRTH DATE |
| (last) | (first) | (m.i.) | (month / day / year) |
| ADDRESS(number) | (street) | (apt. #) | PHONE # |
| CHECK ONE: | OWN RENT | . 1 | |
| LANDLORD'S NAME | | | PHONE # |
| LANDLORD'S ADDRE | ESS | | |
| DATE YOU MOVED IN | NTO AVALON(r | month / day / year) | |
| PREVIOUS ADDRESS | | | |
| LIST ALL CHILDREN Name | LIVING IN YOUR H | OME UNDER AGE Birth Da | |
| | | | |
| LIST ALL PERSONS L'Name | IVING IN YOUR HO | ME NOT ALREADY Birth Da | Z LISTED ON THIS PAGE. |
| ALL IN | FORMATION REC | EIVED WILL BE | KEPT CONFIDENTIAL. |
| YOUR SIGNATURE | | | DATE |