

MOVING PERMIT

BOROUGH OF STOCKERTOWN

209 Main Street

PO Box 128

Stockertown, PA 18083

Phone 610-759-8393 Fax 610-759-9007

IN

OUT

EFFECTIVE DATE:

Permit No:

Name:

Spouse:

All Others in Household:

Owner of Property:

Old Address Include PO Box:

New Address Include PO Box:

Telephone No:

Fee:

\$5.00

Check No: _____

Applicant's Signature:

Date:

Borough Signature:

Date: