OFFICE OF THE TOWN CLERK

TOWN OF RINDGE, NEW HAMPSHIRE

RESIDENT STATEMENT

۱	, declare and sign under penalty of
(Print your name)	
perjury that I am a resident of Rindge, New Hampshi	re and of no other state. My residence address
is:(Street name and number)	, with a mailing address of
(Street name and number)	SAME as residence
Telephone number	
Email address:	
Signature:	Date:
TO BE COMPLETED BY TOWN CLERK/DE	PUTY TOWN CLERK
Documentation presented:	
Statement from Landlord	
Utility Bill/Receipt (within the last 30 days)	
Pay Stub/Check	
Personal Checkbook	
Other (explain)	
Verified by:	
Town Clerk or Deputy Town Clerk	

Date: _____