

TOWN OF HAMPTON FALLS

TOWN OFFICES, 1 DRINKWATER ROAD 603-926-4618



NEW HAMPSHIRE 03844

NEW RESIDENTS FORM – TOWN OF HAMPTON FALLS, NH

PLEASE PRINT:

TODAY'S DATE _____ DATE OF RESIDENCY _____ DATE OF BIRTH _____

FULL NAME _____ PHONE # _____

LEGAL ADDRESS _____ E-MAIL _____

MAILING ADDRESS _____

OTHER MEMBERS OF FAMILY AND/OR PERSONS LIVING AT THIS ADDRESS:

OF CHILDREN IN YOUR HOUSEHOLD: _____

TOTAL # OF DOGS IN YOUR HOUSEHOLD: _____

NAME _____ BREED _____ COLOR _____ spayed male ☐ non-spayed male ☐ / spayed female ☐ non-spayed female ☐

NAME _____ BREED _____ COLOR _____ spayed male ☐ non-spayed male ☐ / spayed female ☐ non-spayed female ☐

**(Please provide updated rabies vaccination paperwork) Additional dogs can be listed on back or below this line*

RENTER/S ONLY:

IF RENTING, NAME OF LANDLORD _____ PLEASE PROVIDE COPY of LEASE _____

I/we rent (please check one): House: ☐ Apartment: ☐ Room: ☐ Outbuilding: ☐

Rental Agreement dates: _____ Avesta Rental: ☐

YOUR PREVIOUS ADDRESS _____

I CERTIFY, UNDER PENALTY OR PERJURY, THE ABOVE INFORMATION IS TRUE TO THE BEST OF MY ABILITY:

SIGNATURE: _____

Office Use Only: Witnessed one of the following: Utility Bill with name and address ☐ Type of Bill _____
Rental/Lease Agreement with name and address/signature page ☐
Rental/Lease agreement validity dates: _____

INITIALS: _____