

Please fill out this application and return it to the Cashier, Monday – Friday 8 a.m. to 4 p.m.  
A moving permit is required when moving in, out, or within the Borough.

**Borough of Emmaus**  
Moving Permit Application      Permit Fee \$1.00

1. Date of Move \_\_\_\_\_

2. List all occupants of your household AGE 16 AND OLDER who are moving.

Full Name

Social Security #

Employer


3. Address moving from \_\_\_\_\_  
\_\_\_\_\_

4. Address moving to \_\_\_\_\_  
\_\_\_\_\_

5. Home telephone \_\_\_\_\_

6. Name of moving Co., (or “self” if moving without a professional mover)  
\_\_\_\_\_

Please list anyone residing in your household that requires special assistance or is on critical medical equipment, in the event of an emergency.

Name(s) \_\_\_\_\_ Address \_\_\_\_\_

Date of birth \_\_\_\_\_ Telephone \_\_\_\_\_

Type of assistance needed \_\_\_\_\_

Type of medical equipment in use \_\_\_\_\_

**Please return to Cashier with payment.**

FOR OFFICE USE ONLY

Moving Permit # \_\_\_\_\_ Date Issued \_\_\_\_\_