POLL TAX
TOWN OF CLARENVILLE

Business Name _____

Fax # 709-466-2276
Phone # 709-466-7937

e-mail: carolann@clarenville.net

**** Please ensure CORRECT ADDRESS & POSTAL CODE is included***

**** Place of Residence - please give STREET ADDRESS if different from mailing address.***

NAME	MAILING ADDRESS	PLACE OF RESIDENCE	DATE HIRED	UNDER OR OVER 18	FULL/ PART	STUDENT YES/NO	NAME OF SPOUSE