



Please return form to:
 Town Clerk
 Town of Burlington
 29 Center St
 Burlington, MA 01803-3058

Town of Burlington

Annual Census - 2019

Please make changes, sign, and return to the Town Clerk's Office in the enclosed envelope. Mail or hand deliver within 10 days after receipt. Additional instructions are on the reverse side of this form. General Laws of Massachusetts mandate an annual street listing of residents as of January 1 of each year. **Warning - failure to respond to this mailing for 2 consecutive years shall result in removal from the active voting list and may result in removal from the voter registration rolls. (M.G.L. Chapter 51 Section 4)**

Helpful Links: website: www.burlington.org
Facebook pages for information:
 for Trash - @BurlingtonPublicWorks
 Animal Control Issues - @BPMAAC
 Town Clerk - @burlington.clerk
 Library - @burlpl
 Police - @burlingtonpd
 Recreation - @burlingtonrecreation
 Selectmen - Burlington MA Selectmen

If you would like to return your Census form electronically, first sign it then scan it or take a photo of this form. Email it back to us at Census@burlington.org

Dwelling Address: _____ Precinct: _____

PLEASE PRINT ANY CORRECTIONS ON THE LINES BELOW

NOTE: Changes in **VOTER REGISTRATION** can **NOT** be made on this form.

Political Party	Name(s) Alphabetical by Last, then First	Mail to	D-Deceased or M-Moved Out	Date of Birth MM/DD/YYYY	*Occupation Enter code number only	# of Dogs	Public Safety <small>(see reverse side)**</small>	Citizenship If Not U.S.	U.S. Veteran
*Occupation code number (print code number only in column 6)									
1:Artistic/Creative/Design, 2:Computer Hardware, 3:Software Development, 4:Construction, 5:Culinary, Hospitality, Leisure, 5A:Travel/Transport, 6:Education, 7:Engineer, 8:Executive Management, 8A:HR, 9:Finance/Real Estate/Insurance, 10:Government/Public Safety, 11:Homemaker, 12:Information Technology, 13:Legal, 14:Medical-Research, 15:Medical-Treatment, 16:Sales, 16A:Sales-Retail, 17:Science-Applied, 18:Science-Research, 19:Service Trades, 20:Student, 21:Retired, 22:Military, 23: Automotive, 24: Building Trades, 25:Clergy, 26:Unemployed, 27:Self-Employed/Consultant, 28:Manufacturing, 29:Cosmetology Trades, 98: Other, 99: At Home									

 Signature of Respondent Date
 (signed under the Penalties of Perjury as prescribed by M.G.L. Chapter 56 Section 4)

Town Hall Business Hours:

Monday, Tuesday, Thursday 8:30AM-4:30PM, Wednesday 8:30PM-7PM, Friday 8:30AM-1PM

Burlington Dog Licenses expire on the date of your dog's rabies vaccination, if you have questions on your dog's license call the Clerk's Office at 781-270-1660. The Town will be running a Rabies Clinic on March 16, 2019, 8AM to Noon, DPW Barn, 0 Great Meadow Rd.

SPECIAL INFORMATION: COMPLIANCE with this State requirement provides proof of residence to protect voting rights, veteran's bonus, housing for the elderly and related benefits as well as providing information for selection of jurors.

YOU MAY NOT REGISTER TO VOTE OR CHANGE YOUR POLITICAL DESIGNATION WITH THIS FORM

If you wish to register, you may do so in person at any city or town hall in the Commonwealth, at the Registry of Motor Vehicles, or obtain a mail-in registration form at most libraries and post offices.

You can also register online at <https://www.sec.state.ma.us/OVR/>

There is one Election this year which will be the Town Election - April 6, 2019; For more information on Election Dates and Deadlines or to check your Voter Registration Status, check the Town website at burlington.org.

GENERAL INSTRUCTIONS:

Verify and/or complete all information listed on the form.

1. POLITICAL PARTY: If there is a letter next to your name, you are registered in that party. If nothing is listed, you are not registered to vote. Unenrolled (U) means you are registered to vote but have not selected a party affiliation.
2. NAME(S): List ALL family or household members whose legal address is the same. Include any member of the family in Military Service, away at school or confined to a rest home whose legal address is the same. If a NEW MEMBER has been added to the family or household, enter the name, birth date and other information on any blank line at the end of this form.
3. MAIL TO: Indicate with Y the person to whom annual census form is to be mailed.
4. DECEASED/MOVED: Key: M = Moved Out, D= Deceased. Enter letter if appropriate. Put a line through the name of any resident no longer residing at this address and list the new address, if known.
5. DATE OF BIRTH: Please correct any errors in your birthdate.
6. OCCUPATION: Enter occupation code ONLY, NOT place of employment. Codes are shown on the front side of the form at the bottom.
7. # OF DOGS List the number of Dogs at the address.
8. PUBLIC SAFETY: Check this box **if you are a member of a public safety agency**** ONLY if you work for and live in Burlington and do not want your name to appear in the street list book. For any exceptions, provide your occupation: _____ and Town/City of employment: _____.
* Public Safety as defined in MGL Ch51 §4(e) is "(e) The name and address of any law enforcement or public safety personnel who so requests shall not appear on the street list and such names shall not be disclosed to any person."
9. CITIZENSHIP: If you are not a U.S. citizen, indicate the country of which you are a citizen.
10. VETERAN STATUS: Check this box ONLY if you are a United States Veteran.