



JAMES T. MULDOWNEY  
Mayor

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# BUREAU OF POLICE CITY OF POTTSVILLE, PENNSYLVANIA

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## **POTTSVILLE BUREAU OF POLICE**

### **RESIDENCE CHECK REQUEST**

*Complete and submit to [police@city.pottsville.pa.us](mailto:police@city.pottsville.pa.us)*

**NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_  
\_\_\_\_\_

**TELEPHONE CONTACT NUMBER:** \_\_\_\_\_

**EMAIL CONTACT:** \_\_\_\_\_

**LOCATION:**  
\_\_\_\_\_

**EMERGENCY CONTACT NAME AND NUMBER:**  
\_\_\_\_\_  
\_\_\_\_\_

**DATES AND REASON REQUESTED FOR:**  
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