

**TOWNSHIP OF ROSTRAVER  
Board of Commissioners**



Board of Commissioners

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**Municipal Building**

201 Municipal Drive

Rostraver Township, PA 15012

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2018

JEFFREY E. KEFFER  
Finance Director/Office Manager

PAMELA S. BEARD  
Secretary

ELAINE M. PHILLIPS  
Treasurer/Tax Collector

TIMOTHY MAATTA  
Solicitor

CARL DEICAS  
KLH Engineers, Inc.

Dear Rostraver Township Property Owner:

Please be advised that the United States Postal Service has added Rostraver Township, PA 15012 and Rostraver Twp, PA 15012 as an alternate preferred last-line designation for 15012 addresses in Rostraver Township. Through a cooperative effort with Rostraver Township, Westmoreland County Addressing, Westmoreland 911, and the United States Postal Service it has been agreed upon for properties in Rostraver Township using the 15012-zip code to now be addressed as Rostraver Township instead of Belle Vernon. The Rostraver Township Board of Commissioners would like to inform property owners located in the 15012-zip code in Rostraver Township to use one of the following to improve location identity for emergency services and mail delivery:

**Rostraver Township, PA 15012 or  
Rostraver Twp, PA 15012**

If your property is located within Rostraver Township with a 15012-zip code, this letter is official notification to change your address. Please make copies of this notification mailer for your personal/business records. It will be your responsibility to change all your information to reflect this address change. Thank you for your cooperation as we enhance our services. If you have any questions, please contact our office at 724-929-8877.

Below is an address change form that needs to be returned to the Westmoreland County Tax Assessment Office. Please complete, sign, and return the attached form by switching your city to Rostraver Township, PA 15012 or Rostraver Twp, PA 15012. Your tax map number can be found on your tax bill, example 56-14-00-0-225.

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(Please complete, cut, and return bottom portion to Westmoreland County Tax Assessment)

Westmoreland County Tax Assessment Address Change Request Form

Date: \_\_\_\_\_

Tax Map Number: 56-\_\_\_\_\_

Owner Name: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Old Mailing Address:

New Mailing Address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Physical Property Address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Owners Signature:

\_\_\_\_\_  
(For persons other than the owner, please provide the necessary documentation)

Mail signed copy to:  
Westmoreland County Tax Assessment Department  
Attn: Address Change  
40 North Pennsylvania Ave, Suite 440  
Greensburg, PA 15601