



911 PHYSICAL ADDRESS REQUEST



DATE OF REQUEST: _____
 APPLICANTS NAME: _____ PHONE NUMBER: _____
 MAILING ADDRESS: _____ CITY: _____
 STATE: _____ ZIP CODE: _____

1. NATURE OF REQUEST

- New location for residential or commercial property.
- New (additional) driveway location on property with pre-existing address already assigned

Please, attach a drawing of the site indicating current/future structures and driveway location.

Owner/Resident may also submit a Pin Drop showing point of access using a satellite image

2. PROPERTY INFORMATION

GPS Coordinates for Gate, Driveway, Easement (Point of access): _____

Please use decimal degrees, example: -96.12345, 31.12345

Lot/Tract: _____ Acres: _____ Survey: _____

Subdivision: _____ Current Owner: _____

Neighbor's Address and Direction if known: _____

2. DESCRIPTION OF STRUCTURE

Please, provide a description of structure for which address is requested:

<u>Type</u>	<u>Exterior</u>	<u>Color/Trim</u>
<input type="checkbox"/> Mfg. Home SW or DW	<input type="checkbox"/> Brick	_____
<input type="checkbox"/> Frame Home	<input type="checkbox"/> Wood	Number of Stories: <u>1</u> <u>2</u> <u>3</u>
<input type="checkbox"/> Brick Veneer Home	<input type="checkbox"/> Siding _____	
<input type="checkbox"/> Commercial	<input type="checkbox"/> other _____	
<input type="checkbox"/> Barn	<input type="checkbox"/> Distinguishing features _____	

OFFICE USE ONLY

PHYSICAL ADDRESS: _____

CITY: _____ ZIP CODE: _____

Processed By: _____

Date: _____