

KATIE DELUCA, AICP
DIRECTOR PLANNING AND ZONING/ZONING
ENFORCEMENT COORDINATOR/TOWN PLANNER



PATRICK LAROW, AICP
Deputy Director Planning and Zoning/Assistant
Town Planner
MARISA ANASTASIO, Senior Planner
BIANCA DYGERT, Planner II
JACALYN PRUITT, Planner II
SHANICE BECKER, Planner I

APPLICATION FOR STREET NUMBER

The following information is required for house number assignment. (A house number assignment is required prior to obtaining a building permit.) Allow one week or more for processing and verification.

<u>Request Type</u>	Application Date: _____
<input type="checkbox"/> New number	Parcel id #: _____
<input type="checkbox"/> Change of address	
Current Address: _____	
Requested Address: _____	

<u>Applicant Information</u>
Single family <input type="checkbox"/> Multi-Unit <input type="checkbox"/> # of Units: _____
Applicant Name: _____
Property Owner (if different than above): _____
Tel #/E-mail: _____
Mailing Address: _____ _____
<u>Applicant/Property Owner Signature:</u> _____

PLANNING & ZONING CONFIRMATION:

OFFICE USE ONLY

Address Issued: _____

Notification Sent: _____ Approved by: _____