NEW ADDRESS REQUEST FORM

LOT MUST BE CLEARED; HOUSE LOCATION STAKED and DRIVEWAY CUT IN BEFORE ADDRESSING CAN BE DONE!!!

Applicant's name: _____ Date: _____

Applicant's telephone #:(home) _____(cell/dayphone)_____

Property owner's name (as it appears on the deed):_____

Any other name listed on the deed: _____

Acreage amount: _____ Will work disturb more than one acre? _____ If so, how many acres_____ (If 1 acre or more, a Soil & Erosion Control Permit from the NC Dept. of Health & Natural Resources is required).

Address requested for: ___New House ___New MH ___ Business ___ Existing Structure

Subdivision name: _____Lot number: _____

Address is on what road: _____

Description of structure (color, type of roof, # of stories, type of siding, etc.)

_____

_____

Proposed use: _____

Directions to address: Start from Columbus

_____

_____

_____

_____

Request taken by: _____ (Initials)

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New address is: _____

Other information: _____

Notified by :_____(Initials) Date: _____

Completed by_____