



ADDRESS CHANGE APPLICATION

As required by Ordinance 4-2010, this application form must be submitted along with photos of the residence showing where the main entrance or entrances are located, a current survey and a non-refundable fee of \$125.00.

CURRENT ADDRESS _____

BLOCK _____ LOT _____

APPLICANT _____

OWNER (If different from Applicant) _____

EMAIL _____ PHONE _____

PROPOSED / REQUESTED NEW ADDRESS _____

REASON FOR ADDRESS CHANGE REQUEST

| | |
|--|--|
| I hereby affirm that all of the above statement and statements contained in the papers submitted herewith are true. | I hereby affirm that I am the owner of the premises involved in this application and that I consent to the filing of the application. |
| <div style="display: flex; justify-content: space-between; border-top: 1px solid black; margin-top: 10px;"> <i>Signature of Applicant</i> <i>Date</i> </div> | <div style="display: flex; justify-content: space-between; border-top: 1px solid black; margin-top: 10px;"> <i>Signature of Owner</i> <i>Date</i> </div> |
| <div style="border-top: 1px solid black; margin-top: 10px;"> <i>Address</i> </div> | <div style="border-top: 1px solid black; margin-top: 10px;"> <i>Address</i> </div> |

FOR OFFICE USE ONLY

COMPLETED & APPROVED BY _____ **DATE** _____