

NEW ADDRESS APPLICATION

PLEASE ASSIGN AN ADDRESS TO MY:

_____ New Building

_____ Trailer

1. YOUR NAME _____
2. CURRENT MAILING ADDRESS _____
3. TOWNSHIP OR BOROUGH IN WHICH NEW ADDRESS IS NEEDED _____
4. IS THIS A _____ RESIDENCE YOUR NAME _____
_____ BUSINESS BUSINESS NAME _____
_____ OTHER NAME _____
5. NAME OF ROAD OR STREET ON WHICH BUILDING IS LOCATED _____
6. NAME OF PROPERTY OWNER _____
7. NEIGHBOR ON RIGHT (FACING BUILDING) _____
APPROXIMATE DISTANCE IN FEET _____
8. NEIGHBOR ON LEFT (FACING BUILDING) _____
APPROXIMATE DISTANCE IN FEET _____
9. NEIGHBOR ACROSS THE STREET _____
10. DAYTIME PHONE NUMBER _____
11. HOME PHONE NUMBER _____
12. **NEW ASSIGNED ADDRESS** _____

TOWNSHIP USE

___ Post Office Copy

___ Update 911 Address List