

# CITY OF SPRINGFIELD, OREGON

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## ADDITIONAL ADDRESS REQUEST

Property Owner: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Person or Agency requesting change if other than owner:  
\_\_\_\_\_

Phone number where you can be contacted between 1:00pm and 5:00pm: \_\_\_\_\_

Address of property you are requesting to have an additional address assigned:  
\_\_\_\_\_

Assessor Map #: \_\_\_\_\_ Tax Lot #: \_\_\_\_\_

Please explain specifically why you feel the location needs an additional address assigned:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Proposed Address: \_\_\_\_\_

Property Owners Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### OFFICE USE

Date Received: \_\_\_\_\_ Received By: \_\_\_\_\_

Fee: \_\_\_\_\_ Receipt #: \_\_\_\_\_ Amount Paid: \_\_\_\_\_

Reference Number: \_\_\_\_\_ Tax Lot #: \_\_\_\_\_

Planning Approval: \_\_\_\_\_ Denial: \_\_\_\_\_

If denied, please explain: \_\_\_\_\_

Planning Review By: \_\_\_\_\_ Date: \_\_\_\_\_

Approved: \_\_\_\_\_ Denied: \_\_\_\_\_

If approved, new address is: \_\_\_\_\_

Reviewed By: \_\_\_\_\_ Date: \_\_\_\_\_