


# ADDRESS REQUEST FORM

 Department of Development & Land Services  <b>E-mail Submittal Preferred: GISMail@outagamie.org</b> 320 S. Walnut St., Appleton, WI 54911 (920) 832-5255 / www.outagamie.org	<b>Assigned Address Number (County Use Only)</b>
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**APPLICANT INFORMATION**

APPLICANT NAME \_\_\_\_\_ PHONE # \_\_\_\_\_ E-MAIL \_\_\_\_\_

RELATIONSHIP TO OWNER *(If Different than Owner, e.g. Builder, Building Inspector)* \_\_\_\_\_

PROPERTY OWNER NAME *(If Different Than Applicant)* \_\_\_\_\_

**PROPERTY LOCATION**

ROAD NAME \_\_\_\_\_

MUNICIPALITY \_\_\_\_\_ TAX PARCEL # \_\_\_\_\_ (e.g. 030111102)

SUBDIVISION or CSM *(If Applicable)* \_\_\_\_\_ LOT # \_\_\_\_\_

SANITARY PERMIT # *(If Applicable)* \_\_\_\_\_ (e.g. SP 09-2013 or State ID #)

DOES THE MUNICIPALITY HAVE ACKNOWLEDGEMENT OF THE ADDRESS REQUEST? Yes  No

*Note: The municipality needs to receive notice of the address request before final submittal to Outagamie County.*

**DRIVEWAY LOCATION**


IS THE PREFERRED DRIVEWAY LOCATION ON A SHARED DRIVEWAY? Yes  No

*Note: If this is the third (or more) address on an existing shared driveway, then this address application may result in the creation of a new private road. (Outagamie County Ordinance Chapter 50.)*

The center of the primary driveway is \_\_\_\_\_ feet, North, South, East or West (Indicate One) of the existing driveway serving building number \_\_\_\_\_ on \_\_\_\_\_ (Street Name).

**AND/OR**

The center of the primary driveway is \_\_\_\_\_ feet from the North, South, East or West (Indicate One) lot line.  
(Sketch below if necessary and/or attach site plan for driveway location).



I, \_\_\_\_\_ verify that the above measurements are true and accurate to the best of my knowledge.  
(PRINT NAME)

\_\_\_\_\_  
(SIGNATURE REQUIRED)

\_\_\_\_\_  
(DATE)

**OUTAGAMIE COUNTY USE ONLY**

Notes: \_\_\_\_\_ Date: \_\_\_\_\_

Assigned By: \_\_\_\_\_

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