

# Addressing Request Application



## ADDRESS CHANGES OR REVISIONS TO EXISTING ADDRESS

**\*Required Fields**

\*Project Name: \_\_\_\_\_ Date: \_\_\_\_\_

Current Address & Suites if applicable: \_\_\_\_\_

Zoning: \_\_\_\_\_ Associated Case Number: \_\_\_\_\_

A.P.N.: \_\_\_\_\_ Quarter Section: \_\_\_\_\_

**\*Check all that apply:**

New  Verification  Suite Assignment  Occupied

Change  Correction  Lot Tie  Lot Spli

Single Family  Commercial

Change to: \_\_\_\_\_

Is there an active Permit or Application?  Yes  No

Permit # \_\_\_\_\_ Plan Check # \_\_\_\_\_

**\*Submittal Requirements:**

**Please submit 1 copy of materials below.**

Copy of building suite layout

Copy of site plan

\_\_\_\_\_  
\*Signature

\_\_\_\_\_  
Date

Check One:  Applicant  Owner  Architect  Contractor

Please Note: A Certificate of Occupancy cannot be issued until address issues are resolved.

**\*Applicant / Contact Information: (Please Print)**

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

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

Company: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

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

E-mail: \_\_\_\_\_

### Records / GIS Official Use Only



Notification Dates: GIS \_\_\_\_\_ Mail Out \_\_\_\_\_

New Address Assigned: \_\_\_\_\_

Suite Numbers/Bldg Letters: \_\_\_\_\_

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

## Planning and Development Services Department

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