



# Address Application

Benewah County  
701 W. College Ave Ste 101  
St. Maries, ID 83861

**Application Fee: \$25.00**

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

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

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

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

PROPERTY INFORMATION: Parcel Number: \_\_\_\_\_ Road Name: \_\_\_\_\_

## MAP TO INTENDED DRIVEWAY:

Draw a basic map showing the closest road intersection and location of your intended driveway. Include road names, lot lines, neighboring property addresses, neighbor names, any landmarks, etc.

Address assigned does not guarantee legal easement, access, property boundaries, or right of ways. Owners are responsible for verification.

Applicant must comply with applicable state laws.

A separate Approach Permit may be required for driveway construction.

Applicant must ensure intended driveway is within the property boundary.

A separate building permit is required for any construction or setting of structures.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

## Mark ALL that apply

- |  |  |
|--|--|
| <input type="checkbox"/> On Site RV                | <input type="checkbox"/> Multiple RV Sites         |
| <input type="checkbox"/> Year-Round                | <input type="checkbox"/> Year-Round                |
| <input type="checkbox"/> Temp/Seasonal ____/12 mo. | <input type="checkbox"/> Temp/Seasonal ____/12 mo. |
| <input type="checkbox"/> Residential Driveway      | <input type="checkbox"/> Immediate Construction    |
| <input type="checkbox"/> Secondary Housing         | <input type="checkbox"/> Utilities Only            |
| <input type="checkbox"/> Barn/Shop                 | <input type="checkbox"/> Commercial/Farm           |
| <input type="checkbox"/> Logging Approach          | <input type="checkbox"/> Bare Land                 |
| <input type="checkbox"/> Mailbox Installation*     | <input type="checkbox"/> Other: _____              |

\*Installation must be in accordance with U.S. Postal regulations

## For County Use Only

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

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

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

Road District: \_\_\_\_\_

Administrator: \_\_\_\_\_