



Ware County Planning & Codes Department

ADDRESS REQUEST

APPLICATION DATE: _____
APPLICANT'S NAME: _____
PRESENT MAILING ADDRESS: _____ CITY: _____ ZIP: _____
HOME PHONE: _____ WORK PHONE: _____ MOBILE PHONE: _____
LAND OWNER OF PROPERTY: _____ PREVIOUS OWNER: _____
ROAD NAME/CROSS ROAD OF PROPERTY: _____
TAX MAP NUMBER/PARCEL NUMBER: _____

DIRECTIONS TO SITE: _____

ADDITIONAL NOTES (IS THIS RESIDENTIAL, COMMERCIAL, OR NON-RESIDENTIAL):

WARE COUNTY PLANNING & CODES ADDRESSING GUIDELINES
FAILURE TO PROVIDE INFORMATION MAY DELAY ADDRESSING.

- 1. ADDRESSING MAY TAKE 3-5 BUSINESS DAYS
- 2. PLEASE FILL OUT APPLICATION IN ITS ENTIRETY
- 3. **PLEASE SUBMIT A PARCEL MAP IDENTIFYING PROPOSED LOCATION OF RESIDENCE OR ADDRESSED OBJECT AND THE LOCATION OF THE DRIVEWAY ENTRANCE.**

APPLICANT'S SIGNATURE: _____ DATE: _____

FOR ADDRESS CHANGES

FROM (OLD ADDRESS): _____ RANGES: _____

TO (NEW ADDRESS): _____ RANGES: _____

FOR NEWLY ASSIGNED ADDRESSES

ADDRESS: _____

CITY: _____ EXPECTED ZIP CODE: _____

DATE ISSUED: _____ ISSUED BY: _____

