

Franklin County Planning and Zoning Department

Address Request

Submit the following information:

1. Completed Application

2. Sketch Plan (showing current or future location of driveway & structure)

Section A: Applicant Information	
Applicant Name	
Mailing Address	
City, State, Zip +4	
Phone	Email
Section B: Property Location and Description	
Tax/Parcel ID Number(s) (16 Digits)	
Road Name	
Subdivision Name(s) & Lot Number	
City & Zip Code	

Should future tax bills for the above parcel be mailed to the new address? Yes No

Office Use Only

ESN #:	TELCO:	EXCH:
Pre-Addressed?	Road Number Range:	
Situs City & Zip Code	Verify ESN # of Structure Location:	
Nearest Address on Each Side		
Property Owner Name(s)		

New Address: _____

- | | |
|---|--|
| <input type="checkbox"/> Not Duplicate Address | <input type="checkbox"/> Not Previously Used (Readdress) |
| <input type="checkbox"/> AddressIt Map | <input type="checkbox"/> GIS Master (Check Road Name) |
| <input type="checkbox"/> VERIFY Database – ID # _____ | |
| <input type="checkbox"/> Applicant – Date: _____ | <input type="checkbox"/> Email <input type="checkbox"/> USPS |