RAISINVILLE TOWNSHIP
ADDRESS REQUEST FORM

NO ADDRESS WILL BE ASSIGNED IF ALL OF THE REQUESTED INFORMATION IS NOT SUPPLIED AND IF THE DRIVEWAY LOCATION IS NOT STAKED ON THE PROPERTY

VACANT PROPERTY LOCATION

PROPERTY I.D. NUMBER_____

BETWEEN _____ AND _____ ON _____
(ADDRESS #) (ADDRESS #) (ROAD OR STREET)

APPLICATION FOR PROPERTY ADDRESS

NAME OF OWNER_____

CURRENT ADDRESS_____

CURRENT TELEPHONE_____

_____ _____
SIGNATURE OF OWNER DATE

**** NEW ADDRESS ASSIGNED ****

_____
STREET NUMBER CITY STATE ZIP CODE

_____ _____
TOWNSHIP OFFICIAL DATE

Please allow 2-3 weeks for processing. Thank you