

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

***FAILURE TO COMPLETE ENTIRE APPLICATION,
INCLUDING THE ADDRESSES YOUR PROPERTY IS
BETWEEN, MAY RESULT IN DELAYS ON YOUR
REQUEST. PLEASE ALLOW 2-3 WEEKS. ***