

ADDRESS CHANGE REQUEST FORM

This form is intended for parcel address changes or when a second address is required/eliminated due to construction or parcel subdivisions/consolidations

Present Building Address: _____
Legal Address: Lot: _____ Block: _____ Plan: _____ Subdivision: _____

Applicant Information Owner Tenant
Name: _____
Address: _____ City: _____ Prov.: _____ Postal Code: _____
Phone: _____ Cell: _____ Email: _____

Reason for Request:

Site Plan - Present Building(s) and Street(s) identified with neighbouring addresses included: Yes No
Letter of Approval by Owner (if applicable): Yes No
Copy of Land Title from Information Services Corporation (**Mandatory**): Yes No

REQUEST FOR ADDRESS CHANGE

I hereby acknowledge that I have read this application and state that the information contained herein is correct and agree to comply with all City Bylaws and/or Provincial laws regulating Building and Occupancy.
It being expressly understood that the revised address does not relieve the applicant from complying with all Bylaws though not called for in the specifications or shown on plans and/or applications submitted.
The address numbers must be placed on a wall within 1 meter of the entrance and plainly visible from the street.

APPLICANT/AUTHORIZED AGENT

DATE

APPLICANT/AUTHORIZED AGENT

**There will be a charge of \$22.84 (tax included) for each new address created*

**Incomplete applications will cause delays in processing*