Address Request Form

You **MUST** answer all questions 1-10 (see instructions). Bring, fax, email, or mail to: Manistee County Planning Department, 395 Third Street, Planning Building, Manistee, Michigan 49660. (231) 723-6041 FAX (231) 398-3526 (set on fine resolution)
Email : jsorensen@manisteecountymi.gov or nbaker@manisteecountymi.gov

*****SEE ATTACHED INSTRUCTIONS*****

1. Tax parcel Number (found on your tax bill) 51-_ _-_ _ _-_ _ _-_ _

2. Circle one: Home * Mobile Home * Apartments * Commercial * Industrial * Oil/Gas Well * Other _____

Name
Address
City, State, Zip
Phone
Email

3. Fill in box, left, with current mailing address where this form is to be returned. *

4. Mark whether structure is ☐ New or ☐ Already Exists

Note:
***If applicant is not the owner of the property a letter from the owner of the property is required before address can be issued.**
****Form without required supporting documentation will be held for 60 days. Forms without documentation will be terminated following the 60 days.**
***** If no construction has started within 12 months from date of issuance, the address will be revoked.**

5. Township Property is in? _____; Section # _____; Lot & Subdivision name: _____

6. Zoning Permit Attached ☐ or Administrator's Signature: _____

7. Health Permit Attached _____

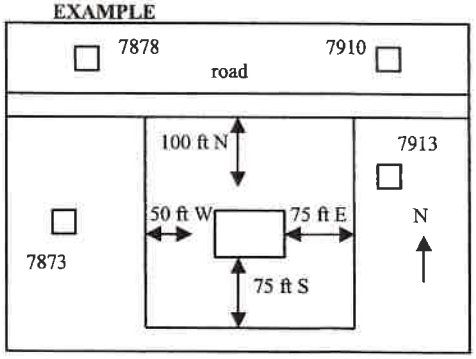
8. What is the Road name the building/meter pole is to be addressed on? _____

9. Exact distance from building/meter pole to the property line (please select or mark which is road frontage). Select One

North _____ feet; South _____ feet; West _____ feet; East _____ feet: Parcel size _____

10. Please provide a scale drawing, below, of property showing (1) property lines, (2) the road(s), (3) location of neighbor's building (on *both sides and across road, if applicable*), (4) the location and distances of your proposed building (pole etc.) to be addressed on your property and (5) an arrow indicating north. * See example*

EXAMPLE



DO NOT WRITE BELOW THIS LINE

Your Address has two parts: An Address Number: _____ Road Name: _____

Your Address is: _____

Date: _____, _____ Signed _____ Only with this line properly signed are copies of this form sufficient evidence an address is issued and a construction code permit may be issued pursuant to the County Address Ordinance, Section 5.10(A), and for startup of service by utility company pursuant to Section 5.02 of the Ordinance NOTE: It is your (the Owner's) responsibility to use copies of this form to notify others of your address, including the building inspector utilities, post office, driver's license, insurance and other records.

MSAG:	PO	P	F	E	M	Ph		ESN
	__ __	___	___	____	__ __	____	_	___ ___ ___