

ADDRESS REQUEST FORM

STEVENS COUNTY INFORMATION SERVICES
215 S. OAK STREET, ROOM 113, COLVILLE, WA 99114
(509) 684-7505

Applicant Name: _____	Property Owner: _____
Mailing Address: _____ _____	(IF DIFFERENT THAN APPLICANT) <input type="checkbox"/> Purchase <input type="checkbox"/> Renting (CHECK ONE)
Home Phone: _____	From Whom: _____
Work or Message Phone: _____	Date: _____
Email Address: _____	

Previous Occupant (If any) _____

RESERVATION PROPERTY ONLY

Is the property on the Reservation? Yes No

If yes, list name of BIA road your driveway will access: _____

Legal Description of property or subdivision name without lot and block

Tax Parcel Number: _____ **Short Plat Number:** _____ **Number of Acres:** _____

Legal Description _____ **Section:** _____ **Township:** _____ **Range:** _____

Or subdivision name: _____ **Lot:** _____ **Block:** _____

Are you in the process of applying for a: Mobile Home Building Permit None

Existing Improvements: House Mobile Home Outbuilding Sewer/Septic RV or Camper Well Cabin

Property Use: Primary Residence Business Raw Land Secondary Residence
 New Construction Future Construction

Utilities: Is there an electrical meter on the property? Yes No **Company:** Avista Inland Power Other

Road Access
Does the driveway access: County Road State Highway Private Easement Named Private Road
Name of the county road, State Highway or private road that the driveway will access?

Neighbors Names & Addresses: (If known) _____

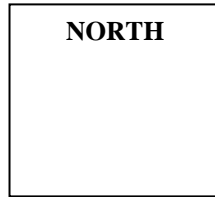
COUNTY USE ONLY

New Address: _____

Received by: _____ **Date:** _____

Avista E-911 Fire District GIS Post Office Public Works

PLEASE DRAW A DETAILED VICINITY MAP TO THE PROPERTY FROM THE NEAREST MAJOR PUBLIC ROAD INTERSECTION. INCLUDE ROAD NAMES, CROSSROADS, MILE MARKERS, LANDMARKS, NEIGHBORS HOMES, DISTANCES, AND EASEMENT INFORMATION. IN THE BOX, SHOW A NORTH ARROW. ALSO ATTACH A SHORT PLAT MAP, IF APPLICABLE.



(Please Draw North Arrow)