## BARNES COUNTY DISPATCH PHYSICAL ADDRESS REQUEST FORM



Please supply the following information for Barnes County to provide a physical address. This information will be used for the purposes of emergency management, E-911 services, planning and zoning, and subdivisions. Assignment and verification of addresses may take <u>up to 14 days</u> after application is received before the applicant is notified.

## \*PLEASE PRINT LEGIBLY\*

Date of Application: App		pplicant Name:		
Mailing Address:				
Telephone #: En				
	r if different than applicant na			
Township:	Section #:	n #: Range:		
Lot/Block #:	Latitude:		Longitude:	
Description:				
Side of the road structur	e is located: North	South 🗌 East 🗌	West OR Right	Left
Road providing property	access:	What is the distar	nce from the road:	
Sub-division name (If ap	olicable):			
Single Family	☐ Mobile Home ☐	RV or Trailer	☐ Business ☐ Inc	dustrial
Construction Site	☐ Energy Company	Oil Site	Other:	
same physical address m	family unit, commercial structures that a separate unit numed and visible at the primary er	ber (Ex. A,B, etc. Ap	artment XXX or Suite XXX)	The unity number
	**FOR C	OFFICIAL USE ONLY*	*	
Date Received:	Assigned A	ddress:		
Forms of Verifications Us	sed: In office GIS	☐ Site Visit/GPS	Other:	
Notification made to:	☐ Applicant ☐ Respo	nsible Post Office	☐ BC Tax Equalization	
Notification Date:	Notifi	cation made by:		
Address entered into:	☐ BCDC Data Base	☐ Mapping	☐ MSAG	
Data Entry Date:	Data	entry made by:		

Please return this form to: