

ADDRESS & STREET NAME APPLICATION



Information Technology Services
 Geographic Information Systems (GIS) and Addressing Services
www.fremont.gov/CityHall/Departments/GIS.htm
 Phone (510) 494-4834

GIS STAFF ONLY

SP# _____ - _____

Grid Map _____ - C - _____

Date Received: ____ / ____ / ____

Date Issued: ____ / ____ / ____

CASE NO.: _____

WORK ORDER NO.: _____

TYPE OF REQUEST: New Addresses Street Names Address Verification (NOTE: Unverifiable addresses may result in a new address being assigned. The Building Division will investigate the legitimacy of the tenant space or structure. If the space or building was not constructed with proper building permits, the address will not be verified.)

APPLICANT - PLEASE PRINT CLEARLY AND COMPLETE ALL SECTIONS BELOW

PROJECT NAME OR SUBDIVISION NO.: _____
 (one letter per box)

DEVELOPMENT TYPE (check all that apply):

NON RESIDENTIAL: New Construction or Addition Tenant Improvement Other _____

RESIDENTIAL: Single Family Townhouse Condo Apartment Secondary Dwelling Unit

OTHER: Mixed Use Other _____

PROJECT SITE ADDRESS/LOCATION: _____

APN: _____ - _____ - _____ - _____ - _____ - _____ - _____ - _____ - _____ - _____

APN: _____ - _____ - _____ - _____ - _____ - _____ - _____ - _____ - _____ - _____

REASON FOR REQUEST: _____

(Use other side if more room is needed)

APPLICANT: Name and mailing address of person requesting the filing of this application.

NAME: _____

COMPANY: _____

ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE #: (____) _____ FAX#: (____) _____

E-MAIL ADDRESS: _____

SIGNATURE: _____

MAIN CONTACT PERSON: Person to be contact other than applicant regarding this application.

ARCHITECT ENGINEER

TENANT OTHER _____

NAME: _____

COMPANY: _____

ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE #: (____) _____ FAX#: (____) _____

E-MAIL ADDRESS: _____

PROPERTY OWNER AUTHORIZATION:

NAME: _____

COMPANY: _____

ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE #: (____) _____ FAX#: (____) _____

E-MAIL ADDRESS: _____

I am authorizing City officials, staff, or their agents or consultants to enter the property for the purpose of this application. I understand that if this request involves the issuance of new addresses, I will be responsible for their posting in a timely manner.

AND (choose one):

I am the sole owner and hereby authorize the filing of this application;

I own the project site jointly with one or more persons and am empowered to authorize the filing of this application on behalf of my fellow property owners; or,

I own the project site in conjunction with one or more persons who are listed with their acknowledgement and authorization for the filing of this application attached for additional property owner authorization/acknowledgements.

SIGNATURE: _____

SP #: _____

ADDITIONAL COMMENTS:

STAFF ONLY

Application Received By: Staff Name: _____ Dept: _____ Phone ext: _____