



SITUS ADDRESS AND STREET NAME CHANGE REQUEST FORM

TYPE OF APPLICATION:

- SITUS ADDRESS CHANGE
- SITUS ADDRESS FOR ACCESSORY DWELLING UNIT (ADU)*
- STREET NAME CHANGE**

* Please include site map indicating the locations of the main residence and the ADU when applying address for Accessory Dwelling Unit.

** Please include site map indicating the section of road to be renamed for Street Name Change.

TO BE FILLED IN BY PLANNING DEPARTMENT STAFF

Date Received: _____
 Receipt No: _____
 Received by: _____
 Planner Assigned: _____
 Concurrent Application: _____

FEES:

Situs Address: _____
 Street Name Change: _____
 Other: _____
 Total fees due: _____
 (Make checks payable to:
 Marin County Planning Division)

Assessor's Parcel No. _____

Project No: _____
 Application No(s): _____

TO BE FILLED IN BY APPLICANT (Please type or print legibly)

1. Assessor's Parcel No(s): _____ Zoning: _____

2. Project Address: _____ City/Zip: _____

3. Property Owner: _____ Phone: _____
 Address: _____ City/Zip: _____
 Email: _____

4. Applicant: _____ Phone: _____
 (if different from owner)
 Address: _____ City/Zip: _____
 Email: _____

5. Reason for new address/street name change:

SIGNATURE

I hereby certify that I have read this application form and that to the best of my knowledge, the information in this application and all the attached exhibits is full, complete, and correct. I understand that any misstatement or omission of the requested information or of any information subsequently requested shall be grounds for rejecting this application, deeming this application incomplete, or denying the application. I hereby authorize employees of the County of Marin to enter upon the subject property, as necessary to inspect the premises and process this application.

Signature of Owner(s)

Signature of Applicant

Date

Date