

## CITY OF SPRINGFIELD, OREGON

225 Fifth St, Springfield OR 97477 (541) 726-3753 permitcenter@springfield-or.gov Online at BuildingPermits.Oregon.gov

ADDRESS REQUEST (fee due)							
☐ NEW ADDRESS	ADD	RESS CHANGE		ADDITIONAL ADDRESS			
Property Owner Name:				Phone #			
Mailing address:				Email			
Person requesting if other that	an owner:			Phone #			
Current address of property (	(change/addtl)						
Map & Tax Lot #				Zoning:			
Please explain specifically v	why you need a nev	v address/address char	nge/ad	ditional address:			
Property Owner Signature: Requested New Address:				Date:			
OFFICE USE ONLY							
Date received:	Fee:	Receipt # OR Permit #:					
APPROVED DENIED	REVIEWED BY:			DATE:			
If approved, new address is:				Zip Code:			
Verified map and tax lot #:				Zoning:			
Address created as a placeh	nolder (new constructio	n only)					
Delay due to:							
New address created in acc	ela						
Address and parcel attached							
New address added to pern							
New address replaced an ex							
Email sent to address group	_						