



**CITY OF SHELTON DEPARTMENT OF  
COMMUNITY & ECONOMIC DEVELOPMENT**

525 West Cota Street  
Shelton, WA 98584  
(360) 426-9731 (Fax) 426-7746

Date Received: \_\_\_\_\_  
Received By: \_\_\_\_\_  
Fee: \$47.00

**ADDRESS REQUEST FORM**

New Address       Address Verification

**Requested By:**

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Day/Message Phone: \_\_\_\_\_

**Mail To (If different from above):**

Authorized Agent: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Day/Message Phone: \_\_\_\_\_

**NOTE: All information is required in order to process your request.**

Parcel No. (Tax Acct. No.) 1. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

2. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Legal Description: \_\_\_\_\_

Please draw a diagram of your property, including nearest existing named road and nearest existing address. Draw your house and driveway. Indicate northerly direction. Please have your driveway signed or marked for easy identification.

Your New Address Is: \_\_\_\_\_  
\_\_\_\_\_

Residence shall place, with-in (60) sixty days, the address on the mailbox and place the address number in a conspicuous location on the structure if visible from the named road, or at the principal place of access (driveway entrance) if the house is not visible from the named road. When an address is assigned with a building permit, the new address shall be posted at the principal place of access to the construction site at the time construction begins and shall be placed on the mailbox upon occupancy.