

COUNTY OF ALAMEDA PUBLIC WORKS AGENCY BUILDING INSPECTION DEPARTMENT

399 Elmhurst Street, Room 141 Hayward, CA 94544 (510) 670-5440, FAX (510) 293-0960, <u>www.acpwa.org</u>

Building Permit Processing Hours Mon.-Fri. 9:00am-4:00 pm Except Holidays

ADDRESS ASSIGNMENT/CHANGE APPLICATION FORM

ADDRESS ASSIGNMENT/CHANGE ATTLICATION FORM			
Application Date:	cation Date: Assigned Case Number: BLA		
Apply For: ☐ New/Additional Address ☐ Replace/Change E	existing Address	☐ Abandon Existing	Address
Assessor's Parcel Number:	Tı	act/PM:	Lot #:
Existing Address Address:		ity:	Zip:
Reason for the Change:			
Additional address to be Abandoned:		City:	Zip:
OWNER INFO Name:			
Address:	City:	Stat	e:Zip:
Phone:	Cell:		
Email: Owner's Signature:			
PROPOSED ADDRESS(ES) Associate Building Permit Number (if any): BLD			
Proposed Address(es) (attach additional sheet as necessary):			
		ocality/City:	Zip:
FOR: One /Two Family Residence: □ New Residence □ 2 nd Unit □ Elec. Meter for well □ Care Taker Unit			
Multi-family, TRACT/PM: ☐ New Unit(s) ☐ Elec Meter for Site			
Commercial/Industrial: ☐ New Building (s) ☐ New Tenant(s) space ☐ Elec. Meter for Uty			
Others: Power for Agriculture Use Cell Site Specify			
SUBMITTAL REQUIREMENTS			
☐ Assessor's Parcel Map (8 ½" X 11") showing proposed and existing building addresses on the property and addresses on immediate adjacent Properties.			
☐ Additional site plan (or clear aerial photo) showing addresses for building locations, suite numbers, and legal access road.			
☐ Additional information attached to this application. Specify:			
☐ Proof of ownership.			
☐ Address assignment fees – Minimum \$140 for each address requested.			
Applicant please read:			
1. The property address will be assigned according to the Alameda County Property Numbering System requirements (Chapter			
15.32). 2. After official address is assigned, the owner shall cause the number to be displayed upon the building or land in such manner as			
to be visible from the street or road.			
 Official Notice of Address Assigned will be distributed to various County Agencies for their use. Any address application involves new street name shall obtain approval from Alameda County Planning Department prior to 			
address assignment	• • • • • • • • • • • • • • • • • • • •		
OFFICIAL APPROVAL Received by:	Date:	Notes:	_
		Notes:	
Assigned Address (only if different from address requested):			
Address:	Locality	/City:	Zip:
APN Book Updated by: Date:	Create	Property Folder(s)	☐ Yes

Date:

No, File Under

Distributed by: