

# Putnam County E-911

3389 Winfield Road  
Winfield, WV 25213

Office (304) 586-0246

Fax (304) 586-0255

## APPLICATION FOR NEW STREET NUMBER/ADDRESS

**REQUEST TYPE** (check all that apply)

Application Date: \_\_\_\_\_

New Street Number

Other \_\_\_\_\_

### APPLICANT and PROPERTY OWNER INFORMATION

Name \_\_\_\_\_ Telephone Number \_\_\_\_\_

Current Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Property Owner (if different than above)  
\_\_\_\_\_

I am the: (check applicable box)  Property Owner  Property Developer  Leasee / Renter

\_\_\_\_\_  
Applicant / Property Owner Signature

\_\_\_\_\_  
Date

### PROPERTY INFORMATION

Existing Street Name \_\_\_\_\_ County / State Route Number \_\_\_\_\_

Community Name (e.i..Winfield, Hurricane, Black Betsy, etc.) \_\_\_\_\_

Cross Street(s) (List the name of the street(s) that are closest to the street listed above)

1. \_\_\_\_\_ 2. \_\_\_\_\_

Location of property (Provide directions to street and any landmarks / subdivision names \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Tax District \_\_\_\_\_ Map Number \_\_\_\_\_ Parcel Number \_\_\_\_\_

What type of US Mail Delivery do you receive:  Home Delivery  Post Office Box

**DIRECTIONS FOR SUBMITTING THIS FORM FOR APPROVAL:**

1. Complete all that apply on the front side of this form.
2. Have the Post Office that serves the location property complete the section below.  
**NOTE: Post Office official signature and stamp are required.**
2. Return this form to Putnam County 911, either by mail at the address listed on the front; by fax at 586-0255; or hand carry to the Office of Planning and Infrastructure in the Putnam County Courthouse, 3389 Winfield Road, Winfield, WV 25213.
3. Upon approval by the Putnam County 911 Center, you will receive a letter verifying the new/changed address.

**-----POST OFFICE ONLY-----**

RECOMMENDED ADDRESS BY POST OFFICE \_\_\_\_\_

House Number and Street/Road Name: \_\_\_\_\_

City & Zip Code: \_\_\_\_\_

**NOTE: The following is required prior to submitting application to 911.**

POST OFFICE OFFICIAL'S SIGNATURE \_\_\_\_\_

POST OFFICE STAMP:

**-----911 ONLY-----**

**\*\*\*\*\*THIS ADDRESS WILL BE VALID UNTIL 911 ADDRESSING IS COMPLETE FOR PUTNAM COUNTY, AT WHICH TIME IT MAY CHANGE**

- |  |            |            |
|--|------------|------------|
| <input type="checkbox"/> Putnam 911 file | Date _____ | Name _____ |
| <input type="checkbox"/> CAD Update      | Date _____ | Name _____ |
| <input type="checkbox"/> MSAG Update     | Date _____ | Name _____ |
| <input type="checkbox"/> US Post Office  | Date _____ | Name _____ |
| <input type="checkbox"/> Municipality    | Date _____ | Name _____ |
| <input type="checkbox"/> WVDOH           | Date _____ | Name _____ |
| <input type="checkbox"/> Customer        | Date _____ | Name _____ |
| <input type="checkbox"/> _____           | Date _____ | Name _____ |
| <input type="checkbox"/> _____           | Date _____ | Name _____ |

File Number \_\_\_\_\_

**APPROVAL**

**Approved by the Putnam County 911 Center**

this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
**Addressing Manager Putnam 911**