

## City of Ann Arbor PLANNING SERVICES — BUILDING SERVICES

301 E HURON ST, COMMUNITY SERVICES AREA, PO BOX 8647, ANN ARBOR, MI 48104 p. 734.794.6263 | f. 734.994.8460 | building@a2gov.org

## ADDRESS CHANGE REQUEST FORM

l,, a	s the owner/agent of parc	el#	am
requesting an address to be assigned/chan	ged. The current address	s(es) is/are:	
The address(es) I would like to be assigned	I is/are:		
NOTE: If you do not have a request our offithe neighborhood.	ce will make the address f	follow suit with the rest of the	addresses in
You will be notified within ten (10) business and the United States Postal Service when			Il City services
NOTE: If you are requesting to change an eon the lines below. Thank you.	existing address please pr	ovide the reasoning for the ch	nange request
The fee for this service is \$100. By signin property and assume all responsibility for the		ou are the current owner/ager	nt for the above
E-mail address:	Phon	e:	
NOTE: The City of Ann Arbor will not sell, re	ent or distribute your e-ma	ail address/phone number.	
Print name:		_	
Relation to property:		_	
Signature:			
OFFICE USE ONLY			
Approved by:		Date:	