

APPLICATION FOR NEW 911 ADDRESS
Lawrence County Department of Planning and Community Development

430 Court St., New Castle, PA 16101
724-656-1907 724-656-2151 (fax)
amiller@co.lawrence.pa.us

FULL NAME	
CURRENT MAILING ADDRESS (where notification will be sent)	
PHONE NUMBER(S)	
E-MAIL ADDRESS	

ADDRESSING LOCATION INFORMATION:

Township, Borough or City of New Address	
When was the structure built?	
Name the road that the <i>driveway</i> connects or will connect with.	
Closest intersecting road	
What road will the house face (if corner lot)?	
Distance between closest intersecting road and your driveway (in feet)	
Previous property owner (if known)	
Tax Parcel Number (<i>obtain from Lawrence County Tax Assessor office 724-656-2176</i>)	
As seen from the house facing the road (your back to the house):	
Nearest residence on left Name:	Address:
Nearest residence on right Name:	Address:
Nearest residence across road Name:	Address:

REQUIRED INFORMATION: We are unable to process requests without this information.

Building Permit No. (attach copy):	Structure Type	Residential:	Comm./Ind./Other:
Deed or Lease (attach copy):		<input type="checkbox"/> Single Family	<input type="checkbox"/> Single Site
Required Documents where applicable (including compliance with PA MPC, Flood Plain Management Act, Stormwater Management Act, etc., copies must be included with application):		<input type="checkbox"/> Multiple Family	<input type="checkbox"/> Multiple Site
		_____ # of Units	_____ # of Units
		<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____

Applicant must also submit an accurate map of your proposed location, roadways, driveways and neighboring structures with this application.

Notice to Applicant:

- (1) The Department does not handle addressing request via phone or in person.**
- (2) All addressing requests are on a first come, first serve basis. Requests can take 2 weeks to process.**
- (3) A \$75 Deposit is required for all applications. The deposit can be refunded if field verification is not required.**
- (4) A New Address Notification Letter will be returned to the Applicant, the appropriate Municipality, and the USPS.**
- (5) Addresses are subject to change.**

DPS USE ONLY BELOW

Date Application Received:		Municipality:	
Field Verification Date:		Verified By:	
Address Assigned:		Date:	
Date Entered Into MSAG:		Entered By:	
GPS / LATLONG:			
Comments:			