

TOWNSHIP OF LIVINGSTON – PLANNING DEPARTMENT

APPLICATION FOR ADDRESS CHANGE

As required by Ordinance 4-2010, this application form must be submitted along with photos of the residence showing where the main entrance or entrances are located, a current survey and a non-refundable fee of \$125.00.

CURRENT ADDRESS

BLOCK LOT

APPLICANT PHONE

OWNER (If different from Applicant)

PROPOSED / REQUESTED NEW ADDRESS

REASON FOR ADDRESS CHANGE REQUEST

I hereby affirm that all of the above statement and statements contained in the papers submitted herewith are true.

Signature of Applicant Date

Address

I hereby affirm that I am the owner of the premises involved in this application and that I consent to the filing of the application.

Signature of Owner Date

Address

FOR OFFICE USE ONLY

DATE COMPLETED & APPROVED
