



# COLUMBIA COUNTY 911 ADDRESSING / GIS DEPARTMENT



P. O. Box 1787, Lake City, FL 32056-1787  
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## Application for 911 Address Assignment Form

**NOTE: ADDRESS ASSIGNMENT MAY REQUIRE UP TO 10 WORKING DAYS. IF THE ADDRESSING DEPARTMENT NEEDS TO CONDUCT ON SITE GPS LOCATION IDENTIFICATION OR OTHER ACTIONS, ADDITIONAL TIME MAY BE REQUIRED.**

Date of Request: \_\_\_\_\_

Requester Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

Contact Telephone Number: \_\_\_\_\_

(Cell Phone Number if Provided): \_\_\_\_\_

Requested for Self: \_\_\_\_\_ or Requested for Company: \_\_\_\_\_  
(check one)

If Address is Requested by a Company, Provide Name of Requesting Company:

\_\_\_\_\_

Parcel Identification Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

If in Subdivision, Provide Name Of Subdivision:

\_\_\_\_\_

Phase or Unit Number (if any): \_\_\_\_\_ Block Number (if any): \_\_\_\_\_

Lot Number: \_\_\_\_\_

**Attach Site Plan or you may use back of Request Form for Site Plan:  
Requirements for Site Plan Are Listed on Back of Request Form:  
(NOTE: Site Plan Does NOT have to be a survey or to scale; FURTHER a  
Environmental Health Dept. Site Plan showing only a 210 by 210 cutout of a  
property will NOT suffice for Addressing Requirements.)**

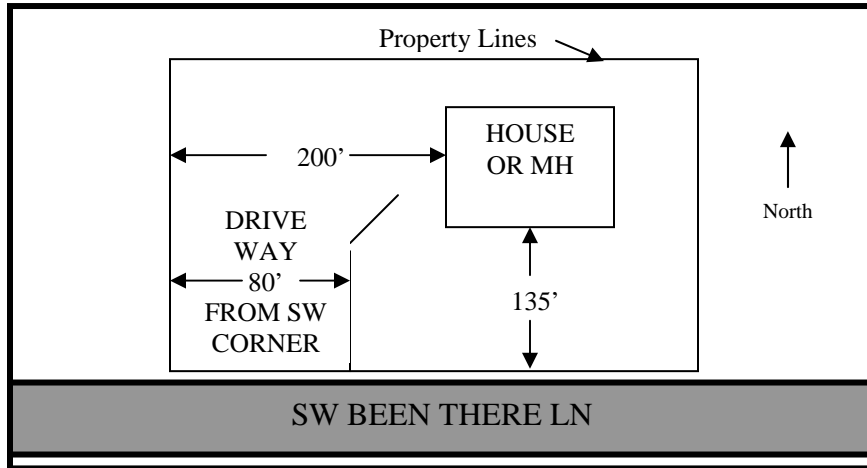
### *Addressing / GIS Department Use Only:*

Date Received: \_\_\_\_\_ Date Assigned: \_\_\_\_\_

ID Number: \_\_\_\_\_

1. A PLAT, PLAN, OR DRAWING SHOWING THE PROPERTY LINES OF THE PARCEL.
2. LOCATION OF PLANNED RESIDENT OR BUSINESS STRUCTURE ON THE PROPERTY WITH DISTANCES FROM AT LEAST TWO OF THE PROPERTY LINES TO THE STRUCTURE (SEE SAMPLE BELOW).
3. LOCATION OF THE ACCESS POINT (DRIVEWAY, ETC.) ON THE ROADWAY FROM WHICH LOCATION IS TO BE ADDRESSED WITH A DISTANCE FROM A PARALLEL PROPERTY LINE AND OR PROPERTY CORNER (SEE SAMPLE BELOW).
4. TRAVEL OF THE DRIVEWAY FROM THE ACCESS POINT TO THE STRUCTURE (SEE SAMPLE BELOW).

**SAMPLE:**



**SITE PLAN BOX:**

