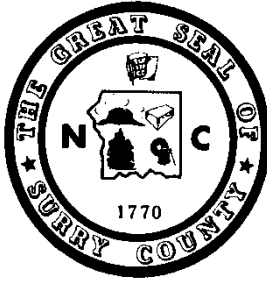


Office of the
Surry County
Tax Administrator



915 East Atkins St.
PO Box 588
Dobson, NC 27017

Surry County
Enhanced 911 Addressing
PHONE (336) 401-8100 EXT 120

*All fields **MUST** be completed for an address to be issued. *

DATE: _____ PARCEL ID: _____

CURRENT LANDOWNER:

NAME(S): _____

PHONE NUMBER(S): (H) _____ (M) _____ (W) _____

To receive your new address letter, please provide:

EMAIL ADDRESS: _____

OR

CURRENT MAILING ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

FUTURE RESIDENT:

LAST: _____ FIRST: _____

TYPE OF STRUCTURE: (Circle one that applies)

Single-wide Double-wide Modular Home Site-built Home Commercial Industrial Cell Tower

Other: _____ Length of driveway: _____ Approx. Structure Dimensions: _____

Directions to Property: _____

****DRIVEWAY MUST BE CREATED/STAKED WITH RIBBONS! ****

****By signing this statement, I realize that the location of my driveway and structure determines my address. If the location or orientation of the structure or driveway which affords primary access to my addressed structure changes from what I have indicated on the map or the location is found to be incorrect according to GPS coordinates, I am aware that my address is subject to change. Accurate addressing information is critical for emergency response vehicles to quickly locate your address. Failure to provide proper information and to keep it current could result in a delayed response time. ****

*(Landowner **MUST** sign if Future Resident is different from Landowner.) *

LANDOWNER SIGNATURE: _____ PRINT _____

OR

CONTRACTOR SIGNATURE & **PHONE:** _____ PRINT _____

DO NOT WRITE BELOW LINE

OFFICIAL DEPARTMENT USE ONLY

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____