

Please complete the entire upper portion of this request form. Return it to: Central Telecommunications Center, 911 Core Road, Parkersburg, WV 26104.

WOOD COUNTY 9-1-1

NEW ADDRESS REQUEST FORM

Applicant Name: _____

Applicant Phone #: _____

Previous Property Owner Name: _____

FOR EXISTING STRUCTURES

Current Address: _____

Current Road Name: _____

Tax District: _____

Tax Map #: _____

Parcel #: _____

Describe Physical Location: _____

FOR NEW OR REMODELED STRUCTURES - Building Permit #: _____

OFFICIAL USE ONLY

Latitude: N/A Longitude: N/A

Agency Assignment: (F) _____ (L/E) _____ (E) _____

Date/Time faxed to Map Processor: _____

Processor Signature: _____ Process Date: _____

New Street Address: _____

City: _____

State: _____

Zip Code: _____

Customer Signature of Receipt:
(Upon picking up your new address)

*Note: If NEW STRUCTURE, a map must be submitted to show location of house and driveway