



TRINITY COUNTY

PLANNING DEPARTMENT

530 MAIN ST., P.O. BOX 2819
WEAVERVILLE, CALIFORNIA 96093
PHONE (530) 623-1351 ♦ FAX (530) 623-1353

ADDRESS INFORMATION APPLICATION (Rev:05.2022)

Scan and email form to: info.planning@trinitycounty.org or mail to address at the top of this form

APPLICANT	MAILING ADDRESS	PHONE NUMBER
_____	_____	_____
Email _____	City _____ Zip _____	_____

REPRESENTATIVE (If other than applicant)	MAILING ADDRESS	PHONE NUMBER
_____	_____	_____
Email _____	City _____ Zip _____	_____

PROPERTY OWNER (If other than applicant)	MAILING ADDRESS	PHONE NUMBER
_____	_____	_____
Email _____	City _____ Zip _____	_____

ADDRESS INFORMATION TO BE SENT TO: Applicant Representative Owner

PLEASE CHECK THE APPROPRIATE REQUEST BOX:

ADDRESS VERIFICATION no charge

ASSESSOR'S PARCEL NUMBER: _____

EXISTING ADDRESS: _____

NEW ADDRESS \$50. (parcel owner request note: requests may be denied based on GIS calculations, no refund)

IN ORDER TO ISSUE ACCURATE ADDRESSING, PLEASE PROVIDE THE FOLLOWING INFORMATION:

ASSESSOR'S PARCEL NUMBER: _____

PROVIDE A PLOT PLAN, SHOWING ALL PROPERTY LINES AND THE FOLLOWING INFORMATION:

- LOCATION AND NAME OF THE ROAD GIVING DRIVEWAY ACCESS TO YOUR PARCEL.
- DRIVEWAY LOCATION GIVING ACCESS TO YOUR DWELLING.
- LOCATION OF DWELLING (PLEASE INDICATE IF MOBILEHOME OR HOUSE) ON PARCEL.

TO BE COMPLETED BY THE PLANNING DEPARTMENT

DATE: _____ FEE: _____

ISSUED BY: _____ RECEIPT NUMBER: _____

DATE APPLICANT NOTIFIED: _____

OFFICIAL ADDRESS: _____

UNABLE TO ASSIGN ADDRESS DUE TO: _____

NOTES: _____