

ADDRESS REQUEST/VERIFICATION FORM

New Address

Verify Existing Address

Address to verify: _____

Property owner's name: _____

Phone number: _____ Email: _____

Name of person requesting address: _____

Phone number: _____ Email: _____

Relationship to owner: _____ Agency Name: _____

Parcel #: 05 - ____ - ____ - ____ - ____ - ____ - ____ . ____ PPIN: _____

Parcel # lookup: open.baldwincountyal.gov (select "Property Tax Information")

Structure Type:

Single Family

Condominium

Utility (temp pole)

Multi-Family

Barn

Type: _____

Mobile Home

Lift Station

Other: _____

Apartment

Culvert

Commercial – Business Name _____

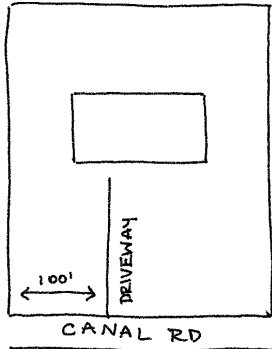
X, Y coordinates for the structure requiring an address (if known)

Latitude: _____ ie. 30.284497 N

Longitude: _____ ie. -87.582124 W

Please attach a map or provide a description of the structure/house placement and driveway location in the box below. Identify the street(s) locations and names. This will assist our office in assigning the correct address for your location.

Example:



*Please mark footage from the center of the driveway (or proposed driveway) to the closest property line or driveway entrance.

Please submit form via email to sbrumley@OrangeBeachAL.gov

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