

This form is to request the assignment of an address to your project. Note that addresses will only be assigned when new construction or an additional dwelling unit is proposed. If no new construction/additional dwelling unit is proposed, a change of address will only be granted for the following reasons:

- The existing entrance on a corner lot is on a different street.
- You have documentation that demonstrates difficulty in receiving mail or emergency services.
- The address number is duplicated, or the same address number exists on a similar street name.

Only the Property Owner or Authorized Representative can request an address assignment/change. Application will be processed within 7-14 and notification sent to provided email. Please return the completed form to Community Development Department at: <u>Addressing@stocktonca.gov</u>.

Required Information: Property Owner's Name:			
Phone Number:E-mail:			
Date Purchased (if sold within the pas	st year):		
Site Address (if Applicable):			
Request Type:	Propert	ty Type:	
 New Single-Family Dwelling 		Commercial	
□ Change of Address		□ Industrial	
Property APN:			
Reason for Request:			
l,, Certify	y under penalty of perju	ury that the preceding information is true and cor	rect.
Property Owner's Signature:		Date:	
	(For Office Us	se Only)	
Received by:	Date:	Proof of Ownership:	
City of Stockton Community De	velopment Departmen	nt • 345 N. El Dorado Street, Stockton, CA 9520	12