



INSTRUCTIONS FOR COMPLETING NEW ADDRESS REQUEST FORM

Venango County 9-1-1 * Addressing / Mapping Department *
*1052 Grandview Rd * Oil City, PA 16301*
*Phone: 814-677-0325 * Fax: 814-677-2958*



The following directions have been designed to aid in the accurate completion of this form. Please print or type all of the information requested.

Application Information:

1. Print or type applicant's legal first name, middle initial and last name.
2. Supply the telephone number at which the applicant can be reached.
3. Supply the applicant's current mailing address, including City, State and Zip Code. Upon address approval a New Address Notification Form will be sent to the applicant at this address.
4. Supply the name of the municipality (City, Township or Borough) in which the new address structure is located.

New Address Information:

5. Supply the name of the road or the route number that will be accessed by the new address structure. If the new structure will be located on a corner, please supply the road that will be accessed by the applicant's driveway.
6. Supply the official address of the structure located nearest the applicant's new structure. The nearest addressed structure should access the same road or route number listed in Question #5.
7. Supply accurate distances between the applicants proposed driveway location and the nearest driveway of the structure listed in Question #6.
8. Indicate whether this lot was created from a subdivision and/or whether a land survey was performed at the applicant's new address site. Place a check mark in the appropriate box.
9. Supply name of the subdivision the applicant's new structure is located within or the name of the subdivisor or landowner.
10. Indicate the type of construction of the applicant's new structure by placing a check mark in the appropriate box. Note that multiple family/site constructions must also indicate the number families/sites to be located in the new structure. Strip malls or commercial businesses within one structure will need to be identified for each business. The purpose of this question is to determine if multiple address are needed. If so, please indicate the number of specific dwellings or business entities needing an address.
11. An apartment number or business office suite number is required if your address will be shared with others in the same structure.
12. Supply the parcel number, tax map number, deed book number, acreage of the lot(s). Some information may be located on the applicants' deed.

New Address Location:

13. Sketch approximate location of new address structure as instructed in Question #12. Please refer to the examples supplied. If further assistance is needed contact Venango County 911.
14. A New Address Notification Form will be returned to the applicant and to the appropriate municipality within two weeks of receipt of the application by Venango County 911.

Send completed form to the following address: Venango County 9-1-1
Addressing / Mapping Dept 1052
Grandview Rd.
Oil City PA 16301