



# City of Victorville

## Development Services

Planning ♦ **Building** ♦ Code Compliance ♦ Business License ♦ Animal Control

14343 Civic Drive  
PO Box 5001  
Victorville, CA 92393-5001  
(760) 955-5100  
Fax (760) 269-0072  
planreview@victorvilleca.gov

### Request for Address

**Assessor's Parcel Number:** \_\_\_\_\_  
(Required Information)

Reason for Request: \_\_\_\_\_

How would you like to be notified of address assignment? Please choose one:  Fax  Phone  Email

#### Applicant Information

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone No.: \_\_\_\_\_ Fax No.: \_\_\_\_\_

Email: \_\_\_\_\_

#### Property Owner Information (please complete only if different from applicant above)

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone No.: \_\_\_\_\_ Fax No.: \_\_\_\_\_

Email: \_\_\_\_\_

Relationship to Property Owner: \_\_\_\_\_

By signing below, I am stating that I have been authorized by the property owner to request an address modification.

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature

#### OFFICE USE ONLY

Amount Due: \$71.13 (per address). (\$68 to charge code 4050; \$3.13 to charge code 4086) Date Paid: \_\_\_\_\_

Assigned Address: \_\_\_\_\_

Applicant Notification: \_\_\_\_\_

\_\_\_\_\_ By: \_\_\_\_\_ Date: \_\_\_\_\_