

PLEASE CONTACT YOUR TOWN FOR POSSIBLE DRIVEWAY PERMIT AND/OR FEES.

Oneida County Address Application
Return to your Town with appropriate fees

Office use only

- Building Site
- Existing Dwelling

Municipal Township _____
 Driveway Permits Required? Yes No Permit# _____

Contact Information

Applicants name _____ Phone _____
 Address _____ City _____ State ____ Zip _____
 Email _____ Fax _____
 Landowners name _____ Phone _____
 Address _____ City _____ State ____ Zip _____

Driveway Information

Pin # _____ Road name _____ Side of Road N S E W
 Section ____ Town ____ Range ____ Forty or GL # _____
 Subdivision name _____ Lot ____ Block ____

Indicate Address and distance, each way, from your driveway to the nearest neighbors' driveways. The neighbors can be across the road as long as the closest neighbors are used. Please indicate if you share a driveway with others.

Neighbor 1 address _____	Distance _____	Direction _____
Neighbor 2 address _____	Distance _____	Direction _____
Nearest intersection 1 _____	Distance _____	Direction _____
Nearest intersection 2 _____	Distance _____	Direction _____

Building Information (If different from driveway location)

Building Type _____ Pin # _____
 Section ____ Town ____ Range ____ Forty or GL # _____
 Subdivision name _____ Lot ____ Block ____

Sketch



If any of the information contained on this form is found to be incorrect you may be required to change your address at the time of the discovery. The information presented above is accurate to the best of my knowledge.

Name Printed _____ Signature _____ Date _____

Office Use Only

Received by _____ Date _____
 Address _____ By _____ Date _____
 Assigned _____
 Verified by _____ Date _____ Address Compliant? Yes No

Instructions

Contact Information

1. *Applicants* – Provide your name, present phone, fax, email and address information.
2. *Land Owners* – Provide the owners name, phone and address information if it differs from the applicant's info.

Driveway Information (most of the following information can be obtained from your tax bill)

1. *Pin#* - Provide the parcel identification number shown on your tax bill for the parcel of land containing the intersection of the driveway and the road.
2. *Road name, Side of road* – Provide the Road name and circle the side of the road that the driveway is on.
3. *Section, Town, Range, Forty or GL#* – Provide the section, township, range and forty or GL# (i.e. NWSE, GL3, etc.) that the driveway/road intersection is located.
4. *Subdivision Plat Name, Lot and Block* – Specify the lot, block and subdivision name of the driveway parcel, if applicable and indicated on your tax bill.
5. *Neighbors* – Provide the addresses, distances and directions to the two nearest neighbors' driveways **on either side of the road** OR
6. *Intersection-if closer than a neighbor*, measured along the road, **in both directions** use either neighbors or intersections **WHICHEVER IS CLOSEST.**

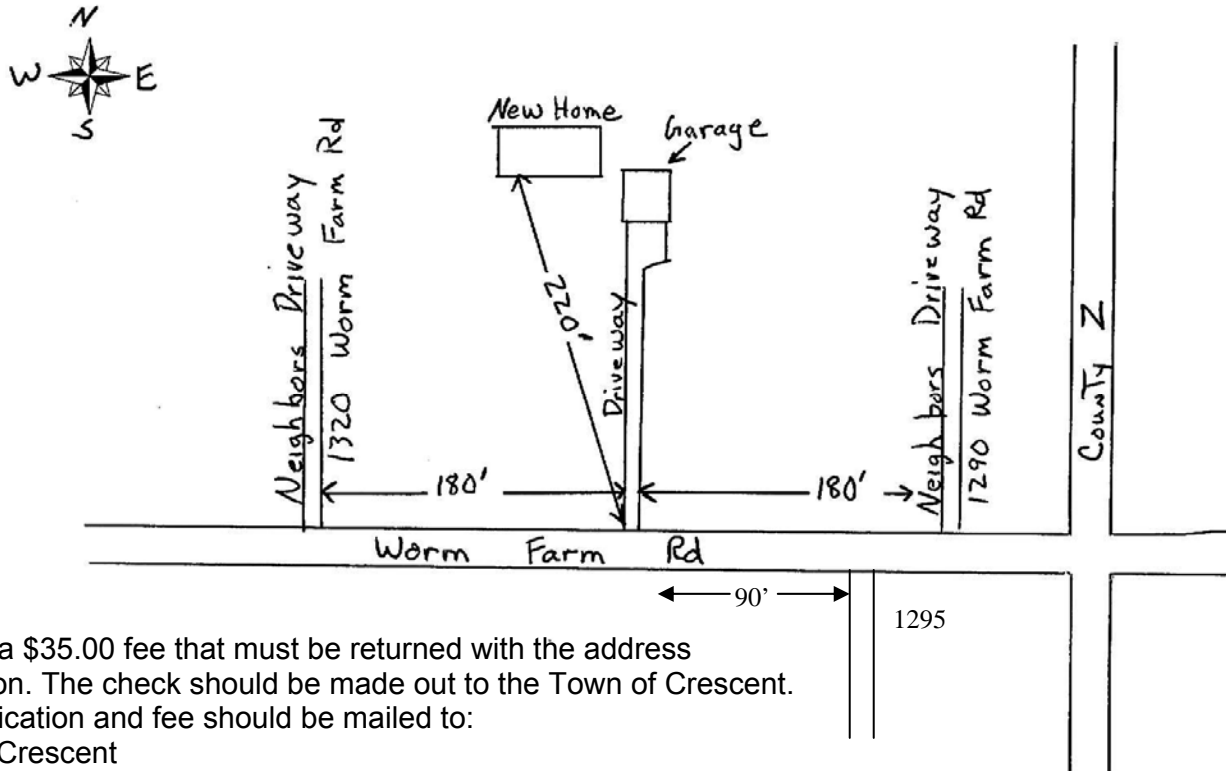
Building Information

1. *Building type* – Provide the building type for building receiving the address with this application (house, commercial building, etc...).
2. It is only necessary to fill out the other lines in this section if the information is different from the information for the driveway.

Sketch – Please draw a sketch of the location of your driveway as accurately as possible. This sketch should show the following items:

1. Show the distances between your driveway and you neighbors' driveways or road intersections.
2. Driveway information -see sample sketch below. Make sure your distances are accurate to the nearest 10'
3. Miscellaneous information – Must have the compass shown with directions, any other explanatory text that would be helpful, etc...)

Sample Sketch



There is a \$35.00 fee that must be returned with the address application. The check should be made out to the Town of Crescent. The application and fee should be mailed to:

Town of Crescent
Attn: Tracy Hartman, Clerk
6902 Fire Tower Rd
Rhineland, WI 54501