



Address Request Application

Development Services Department
777 B Street Hayward, CA 94541
510.583.4140

APPLICATION NOTICE

The proposed address is a request only, not a guarantee. The address must be approved by the City of Hayward and must correspond with existing addressing. The City of Hayward may assign an address different than that proposed.

SUBMITTAL INFORMATION

Applicant Name: _____ Phone: _____

Existing APN: _____ Date: _____

Reason for request: _____

Proposed address to be assigned: _____

Site plan attached with North direction showing location of front door(s)

(for Tract and new construction only): Yes No

Please check one:

Tract

Additional unit(s)

Commercial

Utility

Other _____

(Please specify)

Tract #, if applicable _____

Address on either side of property:

Left side: _____

Right side: _____

Owner's Name: _____

Mailing Address: _____

Phone Number: _____

Email: _____

Developer's Name: _____

Developer's Company: _____

Mailing Address: _____

Phone Number: _____

Fax Number: _____

Email: _____

<p>STAFF APPROVAL:</p> <p>_____</p> <p>DATE: _____</p>
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