

PARISH OF ASCENSION
OFFICE OF PLANNING AND DEVELOPMENT



ADDRESS APPLICATION FORM

NOTE: Please allow two business days for addressing application processing.

Name of Applicant/Business: _____

Resident of New Address: _____

Contact Address: _____

Contact Phone Number: _____

Contact Email Address: _____

Lot or Tract Name/Number for requested Address: _____

Property Location (attach copy of survey, final plat, etc.): _____

Name of Road: _____

Directions to Property:

Adjacent Addresses: _____

Does the property have existing structures on site? (Y/N) _____

Description of existing structures: _____

Applicant Signature: _____ Date: _____

INFORMATION PROVIDED BY PLANNING AND ZONING

Assigned Address: _____

Assigned By: _____ Date: _____