



Date:

Type of property* (circle/mark): Residential or Commercial

Address Type (circle/mark):

Suite Number	Model Homes	Water Meter	Other * See comments
Cable Box	As-Built	Vacant Lot	
Cell Tower	Apartments	Lift Station	

Situs Address Requested

(example: 1300 Kalb Dr
5001 Buford Hwy Suite 101

15 243 02 032

18 297 03 002)

Address number, street name & suite (if applicable)	Parcel ID

Contact Information

Contact Person Name/ Requested by:

Required Print First Name:

Print Last Name:

Signature:

* Contact Phone Number(s):

Email address:

* Contact Address:

* Fax:

*City

* State:

Zip Code:

*Comments:

OFFICE USE ONLY:

Date Received:

Completion Date:

Completed by: