



Chief Executive Officer
Lorraine Cochran-Johnson

DEPARTMENT OF PLANNING & SUSTAINABILITY

Interim Director
Cedric G. Hudson

STREET NAME CHANGE APPLICATION

S.N. No. _____

Applicant / Agent / Owner: _____

Mailing Address: _____

Telephone Number: _____ Fax Number: _____ E-mail: _____

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TO BE COMPLETED BY PLANNING & SUSTAINABILITY DEPARTMENT

Map Reference: _____ Date Approved: _____

Date Received: _____ Fee Paid: _____

Commission Districts: _____

Existing Street Name: _____

Proposed Street Name: _____

The following information must be attached to the application:

1. A written petition bearing signatures of a minimum of 51 percent (%) of the property owners fronting said street. The property owners signing shall also constitute a minimum of 51 percent (%) of the linear street frontage. Linear street frontage shall include frontage of properties that abut both sides of the street right-of-way.
2. Map showing street or portion of street affected by change.

Reason for requesting change (Attach additional information if needed.)

SIGNATURE

DATE