



## PLANNING AND ZONING DEPARTMENT ADDRESSING ASSIGNMENT APPLICATION

(formerly AUTHORIZATION FOR UTILITY SERVICES)

### SUBJECT PROPERTY OWNER INFORMATION

**INITIAL Type of Request (one box only):** ☐ New Address Assignment ☐ Existing Address Verification  
☐ New Address WITH (Construction / Placement) Development

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City/State/Zip Code: \_\_\_\_\_

Physical Address: \_\_\_\_\_ IF EXISTS FOR SUBJECT PROPERTY

City/State/Zip Code: \_\_\_\_\_ IF EXISTS FOR SUBJECT PROPERTY

Email: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Submitter confirms subject property 1) **Tax Bill**, and 2) **Recorded Deed** is attached.

\_\_\_\_\_  
Signature (Submitter) Date

### STAFF USE ONLY

**INITIAL boxes** if 1) ☐ **Tax Bill**, and 2) ☐ **Recorded Deed** is attached to this application page *prior to* sending to GIS.

\_\_\_\_\_  
Signature (Receiver; or Staff Submittal) Date

**INITIAL applicable box IF Staff Submittal:** ☐ **Address Correction**, or ☐ **Zoning / Code Enforcement**

Subject property reflected on attached **Bill** and **Deed** is located in the following unincorporated **Zone(s)**: \_\_\_\_\_

**INITIAL box** ☐ **certifying Vicinity Addressing Map** (*identifying* subject Property) attached for above **Physical E911 Address** recommended by GIS Staff, and uploaded for dispatch, pending Director approval.

GIS  
Stamp

\_\_\_\_\_  
Signature (GIS) Date

\_\_\_\_\_  
Signature (Director) Date

**Daniel J. Beaman**

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