



Parker County 9-1-1 Addressing  
 1114 Santa Fe Drive  
 Weatherford, TX 76086  
 817-598-6135 817-598-6189

## PARKER COUNTY 9-1-1 ADDRESS REQUEST APPLICATION

DATE OF REQUEST: \_\_\_\_\_

PROPERTY OWNER'S NAME: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ EMAIL: \_\_\_\_\_

**NATURE OF REQUEST:** \*Addresses are determined by the location of your driveway. If the location of your driveway changes, you MUST contact us to determine if a new address may be required. \*

- \_\_\_\_\_ New construction of residential or commercial property.
- \_\_\_\_\_ New driveway/gate on existing property.
- \_\_\_\_\_ Need Verification of existing address.
- \_\_\_\_\_ Other: \_\_\_\_\_

Will this newly requested address be the primary address on the property? YES \_\_\_ NO \_\_\_ . If not, what is the primary address for this property? \_\_\_\_\_

**LEGAL DESCRIPTION:**

PLATTED SUBDIVISION NAME: \_\_\_\_\_ PHASE: \_\_\_\_\_

LOT: \_\_\_\_\_ BLOCK: \_\_\_\_\_

**OR**

RURAL ACRES: \_\_\_\_\_ ABSTRACT #: \_\_\_\_\_ **Please include a survey and site plan with marked drive/entrance and structure situs. Aerial is also helpful.**

**PROPERTY DESCRIPTION:**

Parker County Appraisal District Property ID \_\_\_\_\_. If it shows a different owner, please provide proof of ownership (deed, contract for deed, deed of trust, or lease contract).

Purchased from relatives? \_\_\_ YES \_\_\_ NO

**DESCRIPTION OF STRUCTURE:**

- \_\_\_\_\_ Manufactured home      \_\_\_\_\_ Single family residence built or in the process
- \_\_\_\_\_ Barndo    \_\_\_\_\_ Barn    \_\_\_\_\_ Duplex    \_\_\_\_\_ Other: \_\_\_\_\_
- \_\_\_\_\_ Commercial: **Describe structure & intended use. For multi-units, please provide site plans.**

Rental Property? \_\_\_ YES \_\_\_ NO

I, the undersigned, swear the above information is accurate and correct.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PLEASE REMIT APPLICATION TO: [911addressing@parkercountytexas.com](mailto:911addressing@parkercountytexas.com)**

-----OFFICE USE ONLY-----

Physical Address: \_\_\_\_\_ CITY & ZIP: \_\_\_\_\_

Issued By: \_\_\_\_\_ Date: \_\_\_\_\_ Notified: \_\_\_\_\_ In person, phone, email

Mapped: \_\_\_\_\_ New Address: \_\_\_\_\_ Existing Address: \_\_\_\_\_