



New/Change of Address Application

Rev.20250702

☐ New Address

☐ Change of Address

☐ Address Verification

☐ Unit Numbering

☐ Other

All addressing with the City must conform to Spokane Municipal Code 17D.050A.

Name of Applicant: _____ Phone Number: _____

Contact Email (Required): _____ Date of Request: _____

Parcel Number (Required): _____

Existing Site Address: _____

New Site Address or Unit Numbering Preference *(Address will be assigned by staff)*

Owner Name & Address *(If different from site address)* _____

Reason for Address Request

**** A simple floor plan/layout is required for multi-tenant unit assignments ****

Owner Signature: _____

DO NOT WRITE BELOW THIS LINE- CITY USE ONLY

☐ DENIED ☐ APPROVED: PERMIT # _____

☐ PAYMENT ☐ APO ☐ E911 Letter Mailed

OK
Completed CHANGES NEEDED

Sewer		
Water		
Building		

Address Validation Email Sent:

County Maintenance Website Updated: