

APPLICATION TO CREATE OR CHANGE A MUNICIPAL ADDRESS NUMBER (OR UNIT NUMBER(s) IN EXISTING BUILDING)

INSTRUCTIONS

The applicant or agent is responsible for the inclusion of all required documents/maps and ensuring that all appropriate sections of the attached application form are completed and all documents/maps are included prior to submission to the Planning Division. Provide the company and/or contact name of the applicant, agent and registered owner if applicable.

If the subject property consists of part lots or blocks, an up-to-date and clearly legible Plan of Survey, 12R Plan or 12M Plan is required to be submitted (one full sized plan and one 8½ x 14 inch reduction).

File the completed application and any supporting documentation with the Planning & Building Services, 350 City Hall Square West, Suite 210.

Staff will review the application and **may return it if it is incomplete and/or required documents are not submitted**. Administration reserves the right to request additional information.

Allow a minimum of 5 working days for processing of the application.

FEES

Fee is due in full at the time of initial application and is subject to change. Please confirm application fee prior to submission of the application.

\$360.00. Cash or a cheque payable to the Corporation of the City of Windsor.

CONTACT INFORMATION

Planning & Building Services
350 City Hall Square West, Suite 210
Windsor, ON N9A 7K6

Telephone: 519-255-6543
Fax: 519-255-64544
Email: planningdept@city.windsor.on.ca
Web Site: www.citywindsor.ca

APPLICATION TO: **CREATE NEW ADDRESS (s)** **CHANGE AN EXISTING ADDRESS**
CREATE ADDITIONAL ADDRESS(s) ON AN EXISTING PROPERTY
CREATE NEW or ADDITIONAL UNIT(s) IN AN EXISTING BUILDING

1. CURRENT ADDRESS: _____
 PROPOSED NEW ADDRESS(s) or UNIT NUMBER(s): _____
Submission of a Floor Plan for An Existing Building Is Required For New Unit Numbers ATTACHED

2. **PROPERTY DESCRIPTION:** Property Roll Number(s): _____
 Legal Description: _____
 Reference (12R) Plan / M-Plan (12M) Plan AVAILABLE: Yes No ATTACHED
 Adjacent Property Addresses: _____
 3. **LOCATION OF PROPERTY:** _____

4. **APPLICANT/AGENT:** _____
 Contact Person: _____
 Address: _____
 Postal Code: _____ Telephone: (____) _____ Fax: (____) _____
 E-Mail Address: _____

FOR OFFICE USE ONLY Fee Paid: \$ _____ Receipt No: _____ Date: _____
 File No: _____ Received By: _____ Assigned To: _____
 Cross Ref. No(s): _____
ZBA, SPC, SDN, PLC, Committee of Adjustment, etc.
 Comments: _____

 ASSIGNED ADDRESS(s)/UNIT(s): _____
 ATTACHED LIST of ADDRESS(s)/UNIT(s): OR AS per ATTACHED MARKED-UP PLAN:
FINAL NOTIFICATION ON HOLD: Yes

Forwarded to: *Director, Fire - Emergency Communications* Accepted
GIS Administrator, Geomatics Division
Assessment Data Analyst, Corporate Services/Financial Services

NOTICE WITH RESPECT TO COLLECTION OF PERSONAL INFORMATION:

I/We also acknowledge that the information requested on this form is collected under the authority of The Planning Act, R.S.O. 1990, Chapter P13, as amended. The information is required in order to process the application. The name and business address of the applicant and/or authorized agent is public information. Any other personal information collected will only be used for internal purposes.