



# MASON COUNTY COMMUNITY SERVICES

Building, Planning, Environmental Health, Community Health

## Address Request Form/Application

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Prefer: Mail or e-Mail notification [Circle One]

E-Mail Address: \_\_\_\_\_

Parcel Number: \_\_\_\_\_ (12-digit number)

**SITE MAP:** PLEASE PROVIDE DRIVING DIRECTIONS TO THE PROPERTY (and most importantly a sketch). SHOW WHICH SIDE OF THE ROADWAY YOU WILL BE BUILDING ON IF THE ROAD INTERSECTS YOUR LAND. LIST ANY ADJACENT ADDRESSES YOU ARE AWARE OF AND NOTATE WHERE YOUR DRIVEWAY IS/WILL BE LOCATED ON THE PARCEL AND NEIGHBORING DRIVEWAYS.

- Application fee: \$173.50 due at time of submittal
- Make checks payable to: Mason County Treasurer
- Mail application to:

Mason County Permit Center  
Attn: Addressing Division  
615 W. Alder St  
Shelton, WA 98584

*Addressing questions? Call (360) 427-9670 ext. 284*

The Mason County Addressing Ordinance requires you to post your new address within 30 days of assignment. It must be placed at your driveway entrance clearly visible from the road in reflective contrasting material. Address must also be posted to any structure within 30 days of its erection in a contrasting color, visible from the roadway or driveway.

\*\*\*\*\*THIS SECTION IS FOR OFFICIAL USE ONLY\*\*\*\*\*

**YOUR NEW ADDRESS IS:**

RECEIVED  LOGGED IN  TIDEMARK  FIRE DISTRICT \_\_\_\_\_  
BILLED \_\_\_\_\_ PAID \_\_\_\_\_ RECEIPT # \_\_\_\_\_