



ADDRESS CHANGE REQUEST

**PUBLIC WORKS DEPARTMENT
RIGHT-OF-WAY MANAGEMENT & PERMITS SECTION**

Office Use Only
Confirmation Received _____
Updated Record _____
Fax notification sent _____
Owner notification _____

APPLICANT CONTACT INFORMATION

APPLICANT NAME _____
COMPANY _____
ADDRESS _____
CITY _____ STATE _____ ZIP _____
PHONE () - CELL () - FAX () -
EMAIL ADDRESS _____

PROPERTY OWNER INFORMATION

NAME OF OWNER _____
COMPANY _____
ADDRESS _____
CITY _____ STATE _____ ZIP _____
PHONE () - CELL () - FAX () -

LOCATION INFORMATION

CURRENT ADDRESS _____
BUSINESS NAME (IF APPLICABLE) _____
PARCEL IDENTIFICATION NUMBER (TAX ID) _____
SUBDIVISION _____ LOT _____
ADDITIONAL LOCATION DESCRIPTION (IF NEEDED) _____

REQUESTED CHANGE

PLEASE USE THE SPACE BELOW TO DESCRIBE YOUR REQUESTED CHANGE OF ADDRESS, INCLUDING EXAMPLES OF DESIRED ADDRESSES AND THE REASON FOR YOUR REQUEST.

BY SIGNING THIS APPLICATION, I AFFIRM THAT I HAVE AUTHORITY TO REQUEST THE CHANGE OF ADDRESS ON THIS PROPERTY AND AGREE TO BE RESPONSIBLE FOR ANY ADDITIONAL CHANGE OF ADDRESS PROCEDURES REQUIRE BY OTHER AGENCIES OR ORGANIZATIONS.

APPLICANT SIGNATURE _____ DATE _____

Office Use Only
ADDRESS CHANGED FROM: _____ ADDRESS CHANGED TO: _____
Comments: _____ Approved by: _____

Q U E S T I O N S (3 0 9) 4 9 4 - 8 8 0 3
City of Peoria Public Works Department
Right-Of-Way Permits: Change of Address Request
3505 N Dries Lane, Room 114D
Peoria, Illinois 61604
Fax (309) 494 - 8855