



APPLICATION FOR ADDRESS # AD _____
COMMUNITY DEVELOPMENT DEPARTMENT
PO Box 1188/1203 N. HUDSON
SILVER CITY, NM 88062
(575) 534-6357 FAX (575) 534-6381

DATE
STAMP

INSTRUCTIONS: Please read and fill out the application completely. Type or print clearly -- illegible or incomplete applications will not be accepted.

APPLICANT INFORMATION:

Name: _____ Proprietary interest in
property: _____
Mailing address: _____
Phone: _____ Alternate phone: _____ Email: _____

PROPERTY INFORMATION:

Existing address (if any) : _____ Existing use:

Zoned: _____

LEGAL DESCRIPTION:

Platted: Lot(s) _____ Block(s) _____
Subdivision/Addition _____
Unplatted: Section _____ Township _____ Range _____
Property code: 3- _____ - _____ - _____ - _____

(The property code # can be obtained from the County Assessor's Office or from the tax bill)

REASON FOR ADDRESS REQUEST:

Signature of Applicant **Date**

FOR STAFF USE ONLY

Assigned Address is: _____

Approved By: _____ Date: _____

Per Section 42-59 of the 2010 Code of the Town of Silver City; It is hereby made the duty of every owner, occupant or agent of any building in the Town required to be numbered by the provisions of this article to put on such building now built in a conspicuous place next to the street on which it fronts, the property number or numbers thereof, which said number or numbers shall be in figures not less than two inches in length; and to so place such numbers on all buildings hereafter built within 10 days after the completion or occupation thereof.