

EVANS COUNTY CODE ENFORCEMENT
EMERGENCY 911 ADDRESSING

Name _____
(Last) (First)

Location Permit No. _____ Building Permit No. _____ (Existing Resident) ____

Description of Home: _____

Directions: _____

Now
Address. _____
(House Number) (Road Name)

(Old Address _____ /P.O. Box _____)

Signed. _____ Signed. _____
Evans County Representative Postal Service Representative

.....THIS ADDRESS IS NOT OFFICIAL UNTIL THIS FORM HAS BEEN SIGNED BY THE
POST OFFICE.

NOTES: _____

