



TROUP COUNTY  
GEORGIA

Troup County, Georgia

# Address Assignment Request

100 Ridley Ave, Lagrange 30240 | FAX: 706-883-1653 | EMAIL: mapper@troupc.org

\$25, \$2/unit \$250 max

Request:  Individual address assignment/change |  Series assignment/change

Paid \$  
Rcpt#

New Address |  Change/Delete Address |  Add Suite |  Change/Delete Suite

**New subdivision/building address requests must be accompanied by final plat or approved building permit**

Applicant:

(If no permit see Special Request)

Permit #:

Address:

City:

State:

Zip:

Phone1:

Phone2:

Fax:

email:

(attach list or plat for multiple parcel numbers)

(street only if no address)

APN: - - -

Current Property Address:

Public

Private

Check one:  Property Owner  Developer  Builder  Architect/Engineer  Other:

(If different from applicant)

Property Owner Name:

Address:

City:

State:

Zip:

Subdivision/Building name:

Is this a corner lot? (Circle one) YES NO

If 'YES', what road will the driveway be on?

Planned Community name:

Number of addresses requested:

\_\_\_\_\_ Root addresses \_\_\_\_\_ Suites

### Type of Structure(s) – Check one

Residential: \_\_\_ Single Family Detached \_\_\_ Du/Tri/Quad \_\_\_ Condos \_\_\_ Apartments \_\_\_ Townhomes \_\_\_ Other:

Non-Residential: \_\_\_ Single Office/Bank/Retail \_\_\_ Office/Industrial Park \_\_\_ Shopping Center \_\_\_ Other:

Institutional: \_\_\_ Recreational \_\_\_ School \_\_\_ Church/Synagogue/Mosque \_\_\_ Assembly \_\_\_ Hospital \_\_\_ Other:

If multi-story building, How many floors? \_\_\_\_\_

### Special Request

\_\_\_ If no permit, reason for address:

\_\_\_ If address change, reason for request:

\_\_\_ Vanity address – Requested number: \_\_\_\_\_

### Signatures

Applicant \_\_\_\_\_ Date \_\_\_\_\_

Property Owner \_\_\_\_\_ Date \_\_\_\_\_

### FOR OFFICE USE

APPROVED

APPROVED with changes:

DENIED because:

County Mapper \_\_\_\_\_ | \_\_\_\_\_ Date \_\_\_\_\_

Print Name

Signature