Fee: $50.00

Application
Change of Address

Plan Review Section (402) 441-7521 Fax (402) 441-8214
DEPARTMENT OF BUILDING AND SAFETY
555 S. 10th Street, Lincoln, NE 68508-2803
City-County Building, Room 203

Legal Description of Property (one source: Property Tax Statement)

_____

_____

Current Owner _____ **Daytime Phone** _____

Current Mailing Address _____

For Property _____

Reason Change of Address Requested _____

_____

_____

If lot over 1 acre, Location of Existing House & Driveway from one of the Property Lines:

-approximately _____ feet along street frontage from the _____ property line.

Any other Address Used for Your Dwelling: (such as bills from Phone Co. or Utilities)

_____

Adjacent Property Addresses (if known):

Location _____ *Address* _____

_____
approximate # of feet N, S, E, or W or my dwelling along same street

Location _____ *Address* _____

_____
approximate # of feet N, S, E, or W or my dwelling along same street

Signature of Applicant x _____

* The Dept of Building & Safety will review above information, determine a logical street address, and will advise the owner of the street address change by letter.

* We can provide a logical Street Address, but we cannot provide a mailing address which includes a Zip Code. A Zip Code is a mailing address component and should be determined by the post office.

OFFICE USE ONLY

Original Street Address: _____

Change to Street address: _____

By _____ Date _____ Staff Time _____:_____ AM PM