



Address Assignment Request

Planning, Building and Code Enforcement

Staff will assign FILE #

Use this form to request the assignment of an address to your project. For information on the addressing process, please see page 2. Note that addresses will only be assigned when new development or alteration work is proposed. **If no new construction or alteration is proposed, a change of address will ONLY be granted for one of the following reasons:**

- The existing entrance on a corner lot is on a different street.
- You have documentation that demonstrates difficulty in receiving mail or emergency services.

INSTRUCTIONS

Submit the form and items below (other documents may also be required depending on your project scope):

For all requests, you must provide:

- Site Plan - Drawn to scale and showing property lines, building footprint, and entrance to the building
- Addressing Fee (2-hour minimum of \$372.00)

For changes to suite or unit numbering: In addition to the above, you must also provide Floor Plans.

To submit your request package (appointments are required) or for addressing questions, please contact:
Kristi Ojigho: 408-794-7482 or Kristi.Ojigho@sanjoseca.gov

Applicants undergoing Plan Review may choose to drop off their request at the Permit Center Assistance Desk.

Use the computer-fillable form at www.sanjoseca.gov/building or please use INK and PRINT clearly.

CURRENT PROPERTY ADDRESS if any:	NUMBER: 2180	STREET: ALMADEN ROAD	SAN JOSE	ZIP: 95125
ASSESSOR'S PARCEL NUMBER:	455	TRACT #:	18	LOT #: 104
PLAN REVIEW # if any:	PLANNING APPROVAL # if any:			
APPLICANT NAME:	MICHAEL RADU			
APPLICANT IS check one:	<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> ARCHITECT	<input type="checkbox"/> ENGINEER	<input type="checkbox"/> CONTRACTOR
	<input type="checkbox"/> DEVELOPER	<input checked="" type="checkbox"/> DESIGNER		
FIRM NAME if any:				
PHONE:	(408) 504-6826		EMAIL: radu@mac.com	

REASON FOR ADDRESS REQUEST check one:

- | | |
|----------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|
| <input type="checkbox"/> Constructing a new building on a parcel with no address | <input type="checkbox"/> Demise or combine suites in a multi-tenant building |
| <input type="checkbox"/> Replacing a building and including a change in use | <input type="checkbox"/> My corner lot entrance is on a different street |
| <input type="checkbox"/> Replacing a building and prior use will continue | <input type="checkbox"/> I'm having difficulty receiving mail or emergency services |

PLEASE DESCRIBE YOUR REQUEST BRIEFLY:

NEW 820 S.F. DETACHED ADU CONSISTING OF
(1) BATHROOM, (1) BEDROOM, (1) KITCHEN AND (2) GARAGES.

PROPERTY OWNER OR AUTHORIZED LEGAL REPRESENTATIVE MUST COMPLETE THIS SECTION	
PROPERTY OWNER NAME:	JOE SIMAS
FIRM NAME if any:	
MAILING ADDRESS:	2360 MAZZAGLIA AV.
PHONE:	669-243-6028
EMAIL:	JOESIMAS@ATT.NET
	DATE [00/00/20XX]

• PROPERTY OWNER SIGNATURE

DATE [00/00/20XX]

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