



# CITY OF MANZANITA

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## ADDRESS REQUEST

Date:     /     /

File #: \_\_\_\_\_ Pre-App. File #: \_\_\_\_\_

**PRE-APPLICATION CONFERENCE REQUIRED PRIOR TO SUBMITTING APPLICATION**

**Once submitted, application materials and applicant information become public record.**

### APPLICANT INFORMATION:

Project Contact Name:		Company:	
Mailing Address:			Zip:
Phone(s):		Email:	
City Limits:	Urban Growth:	Yes	No

### SITE INFORMATION:

Site Address:	
Map & Tax Lot(s):	Zone:

### REASON FOR REQUEST:

### Address Request

1. Completed Request Form (An invoice with payment instructions will be emailed once all required documents have been received)