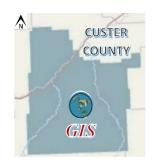


## **CUSTER COUNTY**

Geographic Information Systems 1010 Main St., Ste. 2, Miles City, MT 59301 406-874-4024



## ADDRESS REQUEST FORM

\$45 Processing Fee

DATE:							
PROPERTY A	SSESSN	IENT CODE					
PROPERTY G	EOCOD	Έ					
These numbers can be	e found on t	he most recent tax b	ill or the Co	unty Treasurer's Offic	e.		
Owner Name				Applicant Name			
Mailing Address	Mailing Address						
City, ST, ZIP				City, ST, ZIP			
Phone				Phone			
Email				Email			
Name of current o		ness.					
		11 <sup>1</sup> . 1 . 1 1					
New Address Additional Address Change Address Other							
Please explain the reason for the request. Unclear explanation may cause delay for request.							
Additional pages may be added if necessary.							
What will the new address be assigned to?							
House	Mobile	Garage/	Shop 🗌	Electrical H	Hookup		Other 🔲
Please Describe the location of this new address. Include road name, nearest cross street,							
subdivision name or section, township, and range, or latitude/longitude, etc.							
Include site plan or drawing on an additional page. Drawing does not have to be professionally done.							
By signing, I certify under the laws of the State of Montana that the information given is, to the best of my knowledge, true and correct.							
Print Name				Title			
Signature (owner signature or affidavit required) This area for office uses only:				Date			
This area for office Date Received	e uses only	y: Received By		Fee Paid		Completed	Date
Date Received		Itecorred By		1 00 1 010		Completed Date	

Return completed form, with payment, to the address listed above.