



|                           |
|---------------------------|
| [Office Use Only]         |
| Date received: _____      |
| Staff assigned: _____     |
| E911 Verified: _____      |
| Notifications sent: _____ |

## Address Request Form

Town of North Wilkesboro  
Planning & Inspections Department  
832 Main Street/PO Box 218  
North Wilkesboro, NC 28659  
Email: [planning@north-wilkesboro.com](mailto:planning@north-wilkesboro.com) or [planner1@north-wilkesboro.com](mailto:planner1@north-wilkesboro.com)

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Address where to send the letter:  
\_\_\_\_\_

Parcel ID: \_\_\_\_\_

Describe the situation for the request:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please note the Town of North Wilkesboro has adopted an addressing policy for the Town Limits that govern how staff assigns the addresses. That document is available if requested. Staff will notify government entities of the address change but the applicant is responsible for updating their services such as phone and internet and working with the Post Office to establish the best location for their mail receptacle. Please sign below acknowledging the above statement.

\_\_\_\_\_  
Signature of Applicant Requesting Address

\_\_\_\_\_  
Date