



**Town of Atherton**  
Building Department – Permit Center  
80 Fair Oaks Ln.  
Atherton, CA 94027  
(650) 752-0560

**RE: NEW ADDRESS ASSIGNMENT REQUEST AND NOTIFICATION**

To Whom It May Concern:

The Town of Atherton has received a request to assign a building address to APN# \_\_\_\_\_ . Please review the information below and notify this office within 10 business days of either your Approval or Denial. Please email your response to: [hluo@ci.atherton.ca.us](mailto:hluo@ci.atherton.ca.us).

Thank you for your prompt attention to this matter.

Respectfully,

Mike Greenlee  
Building Official

Date: \_\_\_\_\_

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Existing Property Use: \_\_\_\_\_

Proposed Property Use: \_\_\_\_\_

List current addresses on either side of property: \_\_\_\_\_

**Please attach a site map depicting the surrounding property's addresses to this form.**

Current Property Owner's Name(s): \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Contact Phone #: \_\_\_\_\_ Date of Request: \_\_\_\_\_ APN # \_\_\_\_\_

Existing Property Address: \_\_\_\_\_

Proposed Property Address: \_\_\_\_\_

List current addresses on either side of property: \_\_\_\_\_

Notes/Comments: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Is this request related to a current building permit? No  Yes

If Yes, building permit number: BP \_\_\_\_\_

Is this request related to a current planning application? No  Yes

If Yes, planning application number: IRB \_\_\_\_\_

\_\_\_\_\_  
***Property Owner's Signature***

\_\_\_\_\_  
***Date***

**A photocopy of one piece of identification must accompany this request. Accepted examples: driver's license, passport, California ID card, military ID card, birth certificate.**

Agency Responding \_\_\_\_\_  Approved  Denied

Reason for Denial  
\_\_\_\_\_

Completed by: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

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**Town of Atherton - Office use only**

**Application Fee:** \$ <sup>675</sup> \_\_\_\_\_ **Date:** \_\_\_\_\_ **Receipt #** \_\_\_\_\_

Date Notice Sent: \_\_\_\_\_ Date Returned: \_\_\_\_\_

Applicant Notified: \_\_\_\_\_