

City Address Request

Lander, Wyoming

COMPLETED BY APPLICANT:

Contact Information

Name:

Mailing Address:

City: State: Zip:

Telephone:

Email:

Current Property Address to be changed:

OR Property address for new Lot(s) Attach approved plat:

Are you the legal owner of the property? YES NO

Will the new address become your new mailing address? YES NO

Reason for Request:

Owners Signature: Date

COMPLETED BY STAFF:

New Address Information

New Street Address:

City: Zip:

NOTES:

Completed By: Date Completed: