

**Land Resources & Parks Department**

127 E. OAK STREET • JUNEAU, WI 53039  
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 E-MAIL: landresources@co.dodge.wi.us

**BUILDING NUMBER APPLICATION**

THIS AREA FOR OFFICE USE ONLY	
<b>Activity No.</b>	<b>Application Date:</b>
	Receipt #:

Fee: \$20

NAME & MAILING ADDRESS	PROPERTY DESCRIPTION				
Applicant	Parcel Identification Number (PIN)				
Street Address	Town <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>T</td><td>N</td><td>R</td><td>E</td></tr></table>	T	N	R	E
T	N	R	E		
City • State • Zip Code	Section <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>¼</td><td>¼</td></tr></table> Lot <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>Block</td></tr></table>	¼	¼	Block	
¼	¼				
Block					
Daytime Phone ( ) -	SUBDIVISION				
Email (For Office Use Only)					

**INSTRUCTIONS**

*Please provide a measurement from the center of the new driveway to a reference object. Reference objects can be CSM (certified survey) lot lines, nearby addressed driveways, road intersections. Create a sketch showing the distance between driveway and the reference object. Place pertinent road names and existing addresses to describe your location. The measurement must be accurate, not taken from an automobile odometer.*

**You need a driveway permit for a COUNTY or STATE HIGHWAY –**  
 Do you have a driveway permit?      YES       No

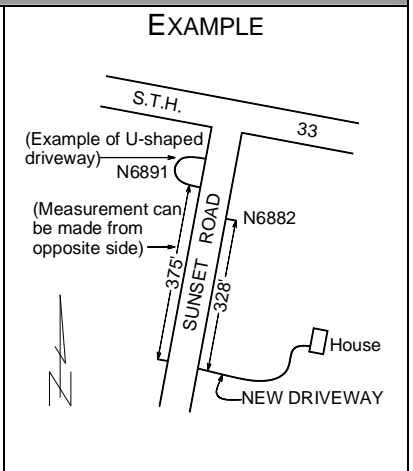
NAME OF ROAD ON WHICH **NEW DRIVEWAY** IS LOCATED:

REFERENCE OBJECT <i>(Example: south lot line)</i>	CIRCLE DIRECTION DRIVEWAY IS FROM REFERENCE OBJECT	NORTH	SOUTH	EAST	WEST
DISTANCE FROM REFERENCE OBJECT					

TYPE OF USE	<input type="checkbox"/> Single Family Home	<input type="checkbox"/> Duplex	<input type="checkbox"/> Multi-Family Residence
	<input type="checkbox"/> Barn	<input type="checkbox"/> Business	<input type="checkbox"/> Other _____

**SITE PLAN**

*(Please Show North Arrow) - (Show more than one driveway if applicable)*



**CERTIFICATE**

I, the undersigned, hereby apply for a County Building Number and certify that all the information both above and attached is true and correct to the best of my knowledge.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**OFFICIAL USE ONLY**

ASSIGNED BY:	DATE:	NEW NUMBER:
		CITY:
		ZIP CODE:

Notification sent to Owner, Town and Sheriff's Department.

Check with Area Postmaster to verify zipcode