



City of Cotati
Community Development
Department
201 W Sierra Avenue
Cotati, CA 94931
(707) 665-3636
permits@cotaticity.gov

DEPARTMENT USE ONLY
RECEIVED BY:
DATE:

ADDRESS REQUEST OR CHANGE FORM

Current Address	Suite/Unit No.
Assessor's Parcel Number	
New Address Requested	
Reason for Address Request <input type="checkbox"/> New Address <input type="checkbox"/> Change of Address <input type="checkbox"/> Other (please specify):	

Property Owner Name			
Phone		Email	
Property Owner Address	City	State	Zip

Building Permit # (if applicable)
Planning Application # (if applicable)

Please attach a site plan and/or floor plan depicting the requested address and the existing surrounding addresses (if available).

I certify that I have read this application and state that the above information is correct.

Property Owner's Signature: x _____ Date: _____