



*New Address Issued: _____

Development Services
PO Box 698
Marshall, Texas 75607
(903)935-7994

NEW ADDRESS REQUEST FORM

Response time is five (5) business days from receipt of request.

Person completing form: _____

Address: _____ City _____ State _____ Zip _____

Phone: _____ Email: _____

Property Owner Name: _____

Address: _____ City _____ State _____ Zip _____

Phone: _____ Email: _____

Where is the property located? _____

HCAD Property ID: _____

Reason for requesting this address? _____

(The HCAD Property ID is important in locating the property. It must be included on each application. If you do not know the Property ID please contact the Harrison Central Appraisal District at 903-935-1991.)

PLEASE SELECT THE TYPE OF ADDRESS NEEDED:

Residential Commercial Irrigation/Water Meter Electrical Meter
 Gas Meter Other _____
 Requested by Owner Requested by Contractor/Non-Owner

If requested by contractor or other, please provide the name and address of company and relationship to the owner/property:

Signature: _____ Date: _____

Printed Name: _____

Please attach a sketch of your property to this page. If a site plan exists, it may be submitted in lieu of the sketch. An aerial view will also be accepted. Once completed, submit to Development Services at the address located at the top of this form or send via email to: AddressRequest@marshalltexas.net

FOR OFFICE USE ONLY

Address Issued: _____

Issued By: _____, Date Issued to Applicant: _____

Submitted To: HCAD USPS 911 Water Billing Public Works