

Shelby County Zoning  
315 1/2 East Main St.  
Shelbyville, IL 62565  
217-774-5797  
Email: shelbyzoning@shelbycounty-il.gov

## APPLICATION FOR 911 ADDRESS

**Instructions to Applicant:** All information requested below must be provided before any address can be assigned. Applicants are encouraged to contact the office of the Zoning Administrator for any assistance needed in completing this form.

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Contact Preference:

Email: \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

Current mailing address: \_\_\_\_\_

Relationship to Property:             Owner             Resident             Realtor/Builder

### Location of Property

Township: \_\_\_\_\_ Section: \_\_\_\_\_

Parcel Number: \_\_\_\_\_

Additionally, please provide a location on a map pinpointing where the driveway will be located.

Application is hereby made for a 911 Address for Shelby County. By signing below, I attest that the information provided is true and accurate to the best of my knowledge. I acknowledge that it may take up to 14 business days for all entities to recognize this address.

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

Official Use Only – Please do not write in this area.

New Address: \_\_\_\_\_

Notification Sent: \_\_\_\_\_ Assigned by: \_\_\_\_\_ Date: \_\_\_\_\_