



E911 LOCATION ADDRESS & ROAD TITLES ASSIGNMENT-VERIFICATION REQUEST & FILE REPORT

ALLEGANY COUNTY, MARYLAND

CONTROL #:

DATE APPLIED: / / 202
TIME: am / pm

APPLICANT/PROPERTY OWNER INFORMATION

This Form, where noted, must be fully completed prior to application acceptance

Address information will be released and dispatched to the person or entity noted in this Section.

Last Name	First Name	Middle	Phone(work)
Address			Phone(home)
City	State	Zip	Phone(cellular)
Email Address		Website	

LOCATION/PROPERTY DESCRIPTION

		<input type="checkbox"/> Map Attached
CURRENT E911 LOCATION or USPS RR ADDRESS (if applicable)::		<input type="checkbox"/> Not Available

NATURE of REQUEST	WRITTEN DESCRIPTION/EXPLANATION of REQUEST
<input type="checkbox"/> New	
<input type="checkbox"/> Modification (Voluntary)	
<input type="checkbox"/> Error Correction	
<input type="checkbox"/> Verification	
<input type="checkbox"/> Extinguishment	
<input type="checkbox"/> Other	
<input type="checkbox"/> Cont'd on Reverse/Attachment	

APPLICANT'S CERTIFICATION: I hereby agree to comply with all regulations and codes, which are applicable hereto. I further agree that any misstatement or misrepresentation of facts presented as part of this application, or change to proposal without approval of the agencies concerned, shall constitute sufficient grounds for the disapproval or revocation of the subject request. I hereby affirm that I own the property which is the subject of this application; or that I am the duly designated representative of the property owner, and that I possess the legal authority to make this Affidavit on behalf of myself or the owner for whom I am acting. I do solemnly declare and affirm under the penalties of perjury that the contents of this Application are true and correct to the best of my knowledge, information and belief.

APPLICANT'S SIGNATURE: _____ DATE: _____

P&Z OFFICE USE ONLY

	n/a	Subject:		Date
<input type="checkbox"/>	<input type="checkbox"/>	File Created; Processing Initiated		
<input type="checkbox"/>	<input type="checkbox"/>	E911 Map Grid		
<input type="checkbox"/>	<input type="checkbox"/>	E911 Work Map Plate #		
<input type="checkbox"/>	<input type="checkbox"/>	Road Title <input type="checkbox"/> Existing <input type="checkbox"/> New <input type="checkbox"/> Modified <input type="checkbox"/> Extinguished		
<input type="checkbox"/>	<input type="checkbox"/>	Notice Dispatched to Agencies for Review/Comment		
<input type="checkbox"/>	<input type="checkbox"/>	E911 Work Map Amended	Int:	
<input type="checkbox"/>	<input type="checkbox"/>	E911 GIS Layer Amended	Int:	
<input type="checkbox"/>	<input type="checkbox"/>	E911 Address Database Updated	Int:	
<input type="checkbox"/>	<input type="checkbox"/>	P&Z Road & Street Inventory Updated	Int:	
<input type="checkbox"/>	<input type="checkbox"/>	Address <input type="checkbox"/> Assigned <input type="checkbox"/> Verified <input type="checkbox"/> Amended <input type="checkbox"/> Extinguished		
<input type="checkbox"/>	<input type="checkbox"/>	Address <input type="checkbox"/> Issued <input type="checkbox"/> Released		
<input type="checkbox"/>	<input type="checkbox"/>	P&Z Notice Dispatched to Applicant		
<input type="checkbox"/>	<input type="checkbox"/>	P&Z Final Action Notice Dispatched to Agencies		
<input type="checkbox"/>	<input type="checkbox"/>	File Closed		

File Notes:

☐ Cont'd on Reverse/Attachment