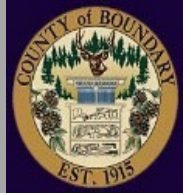


BOUNDARY COUNTY, IDAHO



New Private Road Name Request Form

The Boundary County Uniform Address and street naming Ordinance states under Section 10-7: "If a road accesses three or more properties, it shall be assigned a road name and the parcels shall be addressed in accordance with this Ordinance."

To have a private road serving three or more properties included for mapping and naming, please complete this form and submit to Boundary County GIS. Information gathered will be used solely by Boundary County for the purpose of developing the countywide road naming and addressing system and will not be used for any other purpose or given to any third party. By submitting this form, you agree to allow access to private property by employees of Boundary County for the sole purpose of plotting GPS coordinates to allow accurate mapping of the access road.

PLEASE PRINT

(FOR A ROAD NAME CHANGE REQUEST, ENTER THE EXISTING NAME) _____

ROAD NAME REQUESTED - Note: The Ordinance requirements and current road name list may be reviewed at: <http://www.boundarycountyid.org/site-page/requesting-new-address>

(1st choice)	_____
(2nd choice)	_____
(3rd choice)	_____

Please attach road location map. ROAD LOCATION & ADDITIONAL COMMENTS:

NAME of Requestor / Primary Contact: _____
MAILING ADDRESS: _____
CITY, ST ZIP _____
PHONE NUMBER: _____ **DATE:** _____

PARCELS ACCESSED BY PRIVATE ROAD:

Requesters are encouraged to collaborate with all property owners whose parcels are accessed by the private road. If all property owners' signatures are not provided with this application, approval may be delayed while the County attempts to contact them for comment. (The beginning of the road and each access point will also need to be marked before individual addresses can be assigned.)

Parcel #	Owner(s)	Signature (or confirm @ 208-267-3838
RP		
RP		
RP		
RP		
RP		
RP		
RP		

NEW ROAD NAME ONLY

Date application received: _____
Application received by: _____

Road name committee recommendation: _____
Reason: _____
Road designation: _____
Reason: _____
Final approved name with designation: _____

	Signature	Date
Chairman:	_____	_____
Commissioner:	_____	_____
Commissioner:	_____	_____

FOR ROAD NAME CHANGE ONLY

If applicable: \$125 fee (for change request only)
Amount received: _____
Public hearing date: _____
Road name committee approval of: _____

	Signature	Date
Public hearing (Name change request)	_____	_____

BOARD OF COMMISSIONERS OFFICAL APPROVAL

	Signature	Date
Chairman:	_____	_____
Commissioner:	_____	_____
Commissioner:	_____	_____

ADDRESSING DEPARTMENT

	Signature	Date
GPS centerline and access points:	_____	_____
GIS:	_____	_____