

MADISON COUNTY 911 ADDRESSING



101 West Main – Suite B-13
Madisonville, TX 77864
(936)348-3810 Fax (936)348-6614

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PHYSICAL ADDRESS REQUEST / VERIFICATION

APPLICANT'S NAME: _____ DATE: _____

MAILING ADDRESS: _____ PHONE NUMBER: _____

EMAIL ADDRESS FOR NOTIFICATION: _____

1. NATURE OF REQUEST(s)

Please allow 7 – 10 working days for address assignment.

- New location for residential or commercial property. Appraisal District (CAD) ID: _____
- New driveway on existing property. Driveway Latitude: _____
- Existing structure or land previously unaddressed. Driveway Longitude: _____
- REQUIRED:** A drawing of the site indicating current and future structures and driveways is attached.

2. PROPERTY INFORMATION

Physical Location: _____

Lot/Tract: _____ Acres: _____ Subdivision: _____

Current Owner: _____ If owned less than one year, add date of purchase: _____

- Check if any portion of the current parcel will be placed for sale or transferred to another owner in the foreseeable future.
- Check if only a portion of the property will be used for financing.

Neighbor's Address and Direction if known: _____

Deed Restrictions/HOAs/etc. are not considered by Madison County. Become familiar with yours!

3. DESCRIPTION OF STRUCTURE

Check and circle all that apply:

- Mobile / Manufactured Home Frame / Brick / Brick Veneer Home Barndominium Barn
- Commercial Other _____ Expected Date of Construction: _____

ASK US HOW TO DISPLAY YOUR ADDRESS PROPERLY!!

----- OFFICE USE ONLY BELOW THIS LINE -----

Processed By _____

Date Notified Applicant _____

Date Notified Septic Rep _____

Post Office / Appraisal _____

Date Entered Into Computer _____

PHYSICAL ADDRESS: _____

CITY: _____ ZIP CODE: _____