



**CITY OF HAPPY VALLEY**  
16000 SE Misty Drive  
Happy Valley, OR. 97086  
**Phone: 503 783-3800**

**ADDRESS CHANGE OR ADDRESS  
ASSIGNMENT APPLICATION**

Property Owner's Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_ State \_\_\_\_\_ Zip: \_\_\_\_\_

Daytime Phone number: \_\_\_\_\_

Request is for:

- ↑ Change of existing address  
*Please give current address of property:* \_\_\_\_\_
- ↑ Assignment of unaddressed property  
*Please give assessor's map and Tax Lot Number:* \_\_\_\_\_

Describe your request and the reason(s) for this request in as much detail as possible:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*I am the property owner of the above mentioned address and submit this address application for processing:*

Signature of Property Owner: \_\_\_\_\_ Date: \_\_\_\_\_

**The fee for processing an address change is \$216.00.** The City's Ordinance No. 174 addresses the manner and system in which properties can be addressed. All addressing must be consistent with regional or established grids of Clackamas County and the City's ordinance. Your request will be process within these guidelines.

*The City will notify you and all affected agencies of this address change and/or assignment.*

This application is for change of property addressing only; not for change of a street name.

**FOR STAFF USE ONLY:**

- ↑ Revision of existing address
- ↑ New Address
- ↑ Fee paid \_\_\_\_\_, Date paid: \_\_\_\_\_ Receipt No. \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

Date processed: \_\_\_\_\_