



# Town of Belmont

## 911 Number Request Form



Name of Property Owner: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Are there any other contacts that should be listed for this property?       Yes       No

If yes, please complete the following section:

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

Title: \_\_\_\_\_ Title: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_ Phone Number: \_\_\_\_\_

On what road is the property that needs a 911 number?: \_\_\_\_\_

What side of the road is the property on? \_\_\_\_\_ What is the Map/Lot number?: \_\_\_\_\_

Does this property currently have an existing 911 number?

Yes, the existing address is: \_\_\_\_\_       No, this is a new address.

If no, has a driveway already been built?       Yes       No

What is the property being used for?       Residential       Business       Industrial       Other

Please explain the type of structure (i.e. Single Family/Two Family/ Multi-Family Residence, Storage Building, Restaurant, Store, etc), and provide the number of units within the structure: \_\_\_\_\_

**All 911 Number requests must be accompanied by a map of the property.**

<b>For Administrative Use Only</b>
New 911 Number: _____
Approved by: _____
Date: _____