



MORGAN COUNTY PLANNING,
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Date Received ____ / ____ / ____ Received By ____
New Address Notification sent to checked below on: ____
By: ____
☐ Post Office ☐ Emergency Services ☐ Assessors
☐ Applicant ☐ Other: _____

ADDRESS REQUEST FORM

APPLICANT

Name _____
Address _____

Phone _____
Email _____

LANDOWNER

Name _____
Address _____

Phone _____
Email _____

PROPERTY LEGAL DESCRIPTION AND TECHNICAL INFORMATION

Parcel #: ____ - ____ - ____ - ____ Zone District: ____ Lot #(s): ____
S: ____ T: ____ R: ____ $\frac{1}{2}$ $\frac{1}{4}$ $\frac{1}{4}$ Total acreage in parcel: ____
Subdivision: _____

REASON FOR REQUEST:

OFFICE USE ONLY:

Completed by: _____

Address Given:

Notes: _____
