

**JACKSON COUNTY E911 DATABASE MANAGEMENT  
VILLAGE OF MERRILLAN APPLICATION FOR E911 ADDRESS**

***NOTE: This form is NECESSARY for E911 location of your property/structure(s)***

**Submit Application to:  
Jackson County Zoning and Land Information Department  
307 Main Street, Black River Falls, WI 54615 Fax: (715)-284-0238**

**TO BE COMPLETED BY APPLICANT**

**New Applicant's contact information:**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone Number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Cell: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Will the new house number be used as your primary mailing address? \_\_\_\_\_ Yes \_\_\_\_\_ No

**Check all the apply:**

- New Residence       Change Of Address       Additional Residence       Business  
 Verification of existing Address (Existing address, no home currently on property)  
 Communication Tower      Carrier \_\_\_\_\_  
 Commercial

**Information needed for your new address: (where the building is located?)**

Subdivision or development name, if there is one: \_\_\_\_\_

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

Street name of nearest intersecting Street \_\_\_\_\_

What side of the street is the new building on  North  South  West  East  Left  Right

Is the building a: constructed building  other  describe \_\_\_\_\_

Can your new building be seen from the road?  Yes  No

Is the building a: private home  business  other  Describe \_\_\_\_\_

Will you share a driveway with another building Yes  No

If you will share a driveway with another building, what is the existing building's E911 address? \_\_\_\_\_

If you are standing in front of your new building looking toward the road:

The nearest E911 address to your left is: \_\_\_\_\_

The nearest E911 address to your right is: \_\_\_\_\_

The nearest E911 address across the road is: \_\_\_\_\_

Your email address \_\_\_\_\_ @ \_\_\_\_\_

**Comments or helpful information:**



**PLEASE NOTE:**

**-ADDRESSES WILL BE ISSUED ONLY WHEN A COMPLETE PERMIT APPLICATION HAS BEEN APPROVED.**

**-YOUR ADDRESS IS BASED ON THE INFORMATION YOU PROVIDE TO OUR OFFICE. WE CANNOT ISSUE A PROPER ADDRESS IF THERE IS MISSING OR INCORRECT INFORMATION.**

**-AN INCORRECT ADDRESS CAN CAUSE DELAYS IN EMERGENCY SERVICE.**

**-IT IS YOUR RESPONSIBILITY TO OBTAIN A COPY OF YOUR ADDRESS AND HOUSE NUMBERS POSTING REQUIREMENTS WHEN YOUR PERMIT IS ISSUED.**

**THE INFORMATION I HAVE PROVIDED IN THE APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND ALL INFORMATION DISCLOSED IN THIS APPLICATION.**

\_\_\_\_\_ **DATE:** \_\_\_\_\_  
**PROPERTY OWNER'S SIGNATURE**

***DO NOT WRITE BELOW HERE***

|  |  |   |
|--|--|---|
| Date Received<br>____/____/____<br>Email [ ] Fax [ ] USPS [ ]<br>Other [ ] _____ | <b>Your new E911 address is:</b><br><br><br><br><br><br><br><br><br><br> | Date Addressed<br>____/____/____<br><br>By: _____ |
|--|--|---|