



Development Services / addressing@maranaaz.gov

11555 West Civic Center Drive / Marana, AZ 85653

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ADDRESSING APPLICATION

PROPERTY INFORMATION

Street Name (Existing address if applicable):

Describe Property Location – **Attach Map** (Include nearby intersecting streets and property access):

Tax Code No.(s):

Township-Range-Section:

Subdivision Plat Name:

Sequence #

Lot/Building No.:

Block No.:

Property Type: Single Family Residence Apartment/Condominium Mobile Home Commercial

CONTACT INFORMATION

Owner:

Contact Name:

Address:

City:

State:

Zip:

Email:

Phone No.:

Owner Signature (Required for address change)

Date

Applicant:

Contact Name:

Address:

City:

State:

Zip:

Email:

Phone No.:

REASON FOR REQUEST

Existing Out of Sequence

New Construction (Attach Approved Site Plan or Plat)

Right of Way Permit

Split/Combination (Attach Recorded Deed & Town of Marana Approval)

Other (Please Explain): _____

FOR OFFICIAL USE ONLY

Permit/Project No. _____ Date Received _____

New Address _____

City/Town: _____ Zip Code: _____ Issued Date/By: _____