

Address Request and Verification Application

Every attempt will be made to process this request in a timely manner (2 to 3 days). However, please be aware that some requests take longer than others. If you are unable to submit this form by email, please print the form and mail it to: Oconee County Addressing Office, 415 S Pine St., Walhalla, SC 29691. If you have any questions regarding this form please call us at (864) 638-4251 or email lsimmering@oconeesc.com.

**The Oconee County Addressing Office is the only agency in Oconee County that can assign and verify an address for any purpose.

**As they are subject to change, utilizing address numbers for property identification on legal documents is not advised.

**Contact information is required for the person listed on the deed, regardless of whether they are they applicant

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*Date:	*Tax Map #	#:	
*Subdivision:	*Lot Numb	*Lot Number:	
*Name of person requesting address:			
*Is this person the property owner listed on		No	
If no, list the name on that is on the deed:			
 And the relationship to the property being addressed: 			
*Contact information for person listed on the deed:			
	*Email:		
*Address:		*Phone number:	
*City:	*State:	*Zip code:	
Contact information for person requesting, if other than name listed on the deed: *Email:			
*Address:		*Phone number:	
*City:	*State:	*Zip code:	
*Has there ever been an address assigned to this parcel or structure? Yes			No
If yes, specify the assigned address:			
*Address:			
*City:	*Zip code:		
*Name of road that driveway is located on:			
*Address is being requested for:			
Building permit Address verif	ication Other	er, specify:	
*Indicate the manner in which you would like to be notified of assigned address: Email Postal mail Pick up			
:::Official Use Only:::			
Assigned Address:			
Address:	City		Zip code:
Assigned by:	Date assigne	ed:	