



Assessor's Office use only:

Date Received: _____

Application Number: _____

Street Name Request Form

Applicant Information

Applicant Name: _____ Date: _____
Last First

Phone: _____ Email _____

Are you the property owner? Yes No If no, list owner names below.

Property Owner(s): _____

Street Information

Proposed Street is a: Private Way Subdivision Road Other: _____

Proposed Names of New Street (in order of preference)

1: _____

2: _____

3: _____

Helpful Tip:

Providing at least 3 different proposed names helps to expedite the approval process.

Changing the suffix (Dr, Ave, St) alone is not different enough. (Example, Pine Dr & Pine Ave, are not different)

New Street Accesses Off: _____ Between Numbers: _____

Tax Map/Lot of Access Point: _____

Length of Street (in feet): _____

Number of Lots Accessed: _____

Subdivision Name (if applicable): _____

Please Return Completed Form To:

**Town of Brunswick
Assessing Department
85 Union Street
Brunswick, Maine 04011
OR
tburns@brunswickme.org**

Office Use Only:

Street Approved: _____

By: _____
Addressing Officer - Taylor Burns

Date: _____