911 Address Request Form

Applicant will complete the top section of the form the best you can and supply this form to the 911 Coordinator or proper County official. The County official will than complete the bottom section of the form with the correct 911 address of the location described and forward the form to WRT. Please include a map with road access and structure indicated. You can print off maps from: Google, Google earth, Plat Books, etc.

To be completed by the Applicant

Date of Application:							
Applicant Name:							
Mailing Address:			City:	St	ate:	Zip:	
Email Address:							
Best Contact Number:							
Name of Property Owner (If differ	ent than applicant):						
Township:	Range:	Section:	Quarter S	ection (Select one):	◯ NE	ONW O	SE 🔿 SW
Location of the structure in Decim	al Degrees: Latitude:			Longitude:			
Block Number:		Lot Number:		Additio	n Name:		
Road Name providing property access:			Distance from Road (in feet):				
Structure will be located off the al	pove named road (Select o	one):					
○ North ○ South	C East C W	/est					
Dwelling Type: (Select one):							
Single Family Home (RV or Camper Trailer	O Mobile Home	O Business	O Industrial Site	◯ Cor	struction Site	Oil Well Site
Other Tower:							
Signature:							

To be completed by the 911 Coordinator or authorized County Official

Date Received:							
House Number:	Street Name:		Unit Number:				
Community:							
County:		Additional Address Information:					
Signature of person assigning 911 address:							
Coordinator or authorized County Official, please return this form and map via one of the following; by USPS: at West River Telecom, Attn: Engineering, PO Box 467, Hazen, ND 58545, by Fax: 701-748-7100 or by E-mailing: engineering @wrtc.com							

Email: Press submit at the bottom of this form and it will open a new email message to send to our engineering department.