**STARK COUNTY ZONING**

[rjohnson@starkco.illinois.gov](mailto:rjohnson@starkco.illinois.gov)

(309)286-7172

(309)286-7404

On the Web:

Visit us on the web at:

[www.starkcountyillinois.com](http://www.starkcountyillinois.com)

to fill out the form and send electronically

ffffff

Date of Application:

USPS Mail to:

Stark County Zoning

130 W Main St

PO Box 386

Toulon, IL 61483

Complete this form and return it to the Coordinator by either the web, USPS or Email.

**APPLICANT INFORMATION**

APPLICANT NAME:

APPLICANTS MAILING ADDRESS:

CITY/STATE/ZIP:

APPLICANT PHONE #: EMAIL ADDRESS:

RELATIONSHIP: Property owner Resident developer/builder Realtor Other

OWNER NAME (IF DIFFERENT THAN ABOVE)

OWNER ADDRESS:

STREET TOWN ZIP CODE

NEW ADDRESS INFORMATION

NAME OF ROAD NEW STRUCTURE WILL BE ADDRESSED ON:

NOTE: If located on a corner, list road which driveway will access.

NAME OF NEAREST INTERSECTING ROADWAY:

PIN NUMBER: WHAT SIDE OF ROAD IS YOUR NEW STRUCTURE ON? (NSEW)

CAN STRUCTURE BE SEEN FROM THE ROAD? YES NO

WILL YOUR NEW STRUCTURE SHARE A DRIVEWAY WITH ANOTHER STRUCTURE? YES NO

IF YES, WHAT IS THE EXISTING STRUCTURE’S 911 ADDRESS?

CLOSEST NEIGHBOR? NAME: ADDRESS:

DO NOT WRITE BELOW HERE

NEW 911 ADDRESS: LATITUDE/LONGITUDE:

Applicant Notified: Date Addressed: By:

Added to digital file Added to Database: Post Office Notified:

Assessor Notified: Sheriff notified: EMS Notified:

Henry/Stark Health Dept. OEM notified: Fire Dept. notified