



POLK COUNTY 9-1-1 ADDRESS INSTRUCTIONS

POLK COUNTY 9-1-1
1705 S LILLIAN AVE
SUITE B
BOLIVAR, MO 65613
(417)-777-8844 EXT 7
FAX (417)-777-5343

Instructions

Polk County Central Dispatch is authorized to regulate the numbering of buildings, units within buildings and lots. The following are required to request an address for a new or existing building.

- Complete Address Application
- Site plan

You may obtain the address request form from Central Dispatch or online.

Please call our mapping coordinator at 417-777-8844 opt # 7 if you need assistance or have any questions.

Submit requests to:

Polk County Central Dispatch
1705 S Lillian Suite B
Bolivar MO 65613

Processing may take up to 10 business days

For more information, call 417-777-8844 #7
Or e-mail bmarshall@polkco911.com

Important Facts

The primary purpose of assigning street addresses is to provide an accurate and easily visible address for rapidly locating a home or business in any emergency requiring fire, life and/or safety services and for the efficient mail and parcel delivery to homes and businesses.

If a house is converted into an apartment building Polk County 9-1-1 will assign individual unit numbers based upon addressing guidelines. Addresses are subject to change depending on the structure type.

Whenever practical, street addresses will be assigned to conform to the numbering of the buildings and lots as specified in Polk County Central Dispatch ordinance # 2018-001.

Once an address has been assigned or changed, a letter will be sent to the applicant informing him/her of the newly assigned or changed address. Central Dispatch will notify the Post Office and election officials as required. It is the property owner's responsibility to notify all other parties interested in the new or changed address.



POLK COUNTY 9-1-1 ADDRESS APPLICATION

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APPLICATIONS MAY BE SUBMITTED IN PERSON, BY MAIL OR FAX OR ONLINE

Request for New Address
 Request for Change of Address

PROPERTY OWNER'S NAME:	DATE:
MAILING ADDRESS:	PHONE:
CITY:	PARCAL ID:
LEGAL DESCRIPTION OF PROPERTY:	EMAIL:

BELOW SECTION ONLY FOR REQUESTING ADDRESS CHANGE

CURRENT ADDRESS (FOR CHANGES):	PARCAL ID:
ADDRESS 2:	CITY:
PROPERTY OWNER NAME:	PHONE:
COMMENTS:	

****New Construction Point of Egress and Ingress to Property Indeterminant:**** If the Owner or occupier of the property is applying for a bank loan or needs the Polk County 9-1-1 Center to assign an address number for whatever legitimate reason, the location of the driveway is indeterminant, the owner or occupier of the property may assign the most likely point of egress/ingress to the property for the purpose of the Polk County 9-1-1 Center assigning an address. However, if this assignment of an ingress/egress driveway later should prove to be inaccurate, the owner/occupier shall have an affirmative duty to promptly notify the Polk County 9-1-1 mapping coordinator and pay reprocessing fee of \$25.00. Failure to notify the Polk County mapping of such change in access to the property may result in fines up to an infraction of \$200.00.

_____ initial, understanding the application and terms as stated.

_____ Signature _____ Date

POLK COUNTY 911 OFFICIAL USE

RECEIVED:	ADDED TO GIS:
ASSIGNED ADDRESS:	PROPERTY OWNER:
ADDED TO DATABASE:	MSAG ADDED/CHANGED:
ASSESSOR:	POSTAL SERVICE:
CLERK AND RECORDER:	DATE NOTIFICATION SENT:
COMMENTS:	



POLK COUNTY 9-1-1 SITE PLAN

