



**COMMUNITY DEVELOPMENT DEPARTMENT**

**Code Administration Division**

**129 North Second Street, 2nd Floor Yakima, Washington 98901**

**Phone (509) 575-6126 • Fax (509) 576-6576 Email: [codes@yakimawa.gov](mailto:codes@yakimawa.gov)**

**CITY OF YAKIMA**  
**Change of Address Request**

Return by mail: City of Yakima Code Administration  
129 N 2<sup>nd</sup> St  
Yakima WA 98901

Return by email: [codes@yakimawa.gov](mailto:codes@yakimawa.gov)

**IF COMPLETING THIS FORM BY HAND, PLEASE PRINT CLEARLY.**

**PROPERTY INFORMATION:**

<b>Current Property Address:</b>
<b>Property Owner:</b>
<b>Parcel Number(s):</b>
<b>Reason for requested address change:</b>
<b>New Address:</b>
<b>Owner Contact Telephone Number and Email Address:</b>

I certify that the information contained in this application is both true and correct.

Given under my hand this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
**Name of Owner (printed)**

\_\_\_\_\_  
**Signature of Owner**

<b>Section to be completed by City staff</b>
Effective date of change:
Changed by (staff member name):