

**BOWMAN/SLOPE 9-1-1 SYSTEM  
PHYSICAL ADDRESS REQUEST FORM**

Please supply the following information to have a physical address assigned. This information may be used by Bowman County and /or Slope County for the purposes of emergency management, E-911 services, planning and zoning, and subdivisions.

**\*\*Please Print Legibly\*\***

Date of Application: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Landline Area Code & Number: \_\_\_\_\_ Cell Area Code & Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Name of property owner if different than applicant \_\_\_\_\_

Township \_\_\_\_\_ Range \_\_\_\_\_ Section \_\_\_\_\_

LATITUDE: \_\_\_\_\_ LONGITUDE: \_\_\_\_\_ (Decimal Degrees WGS84)

Lot #: \_\_\_\_\_ Block #: \_\_\_\_\_ Addition: \_\_\_\_\_

Structure located off the Road (circle one)    North side    South side    West side    East side

Road Name providing property access: \_\_\_\_\_

What is distance from the road? \_\_\_\_\_ feet    Subdivision name if applicable: \_\_\_\_\_

Dwelling Type (circle one)

- |                          |                   |               |
|--------------------------|-------------------|---------------|
| Single Family home       | Business          | Industrial    |
| RV or Camper Trailer     | Construction Site | Oil Well Site |
| Mobile Home              |                   |               |
| Other - what type: _____ |                   |               |

Each residential multiple family unit, commercial structure unit and separate building at the same physical address, must have a separate unit number (e.g. A, B, etc. Apartment XXX or Suite XXX). The unit number must be clearly displayed and visible at the primary entrance.

Return this form to: Karla Germann [kgermann@bowmancountynd.gov](mailto:kgermann@bowmancountynd.gov) Fax: 701-523-5443 or  
104 1<sup>st</sup> St NW, Bowman ND 58623

**Do not write below this line - \*\*For Official Use Only\*\***

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Date Received: \_\_\_\_\_ County: \_\_\_\_\_ City: \_\_\_\_\_

Assigned Address: \_\_\_\_\_