



Leon County  
Development Support and Environmental Management  
Development Services Division

Application for Street Name Approval

D-16

Street Location:  
☐ City of Tallahassee  
☐ Leon County  
(Unincorporated area)

Applicant Name:

Mailing Address:

Telephone Number:

Agent Name:

Mailing Address:

Telephone Number:

Email address:

1. A map showing the location of the street proposed for naming or plat drawing must be included and reflect the following information:
- a. Name of subdivision or development:

b. Number of existing buildings accessing the unnamed street:

2. Proposed Street Name(s)

*All proposed street names must be approved for use by the Leon County Department of Development Support and Environmental Management through the submission of an application. Potential street names can be verified before submitting the application by calling the Addressing Unit at (850) 606-1300. To be placed on the Street Name Reserve List, the request must be accompanied by a completed application. There can be no more than twenty-three (23) characters per chosen street name. List each street name, starting with the first choice below.*

<u>Direction</u>	<u>Name</u>	<u>Suffix</u>
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____

Street naming requested by:

☐ Residents

☐ Agent

☐ Staff

3. Street(s) Developed and Ready for Street Sign Placement: ☐ Yes ☐ No

Street Type:

☐ Public

☐ Private

☐ Paved

☐ Unpaved

**APPLICANT SIGNATURE FORM**

I hereby attest that I am a legal owner of property abutting the street that is requested to be named and that I am providing a petition signed by no less than 75% of the legal property owners abutting this roadway, including myself.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_  
 Property Tax ID#: \_\_\_\_\_  
 Email address: \_\_\_\_\_

**STATE OF FLORIDA**  
**COUNTY OF LEON**

Sworn to (or affirmed) and subscribed before me by means of \_\_\_\_ physical presence or \_\_\_\_online notarization, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_ who is personally known to me or has produced \_\_\_\_\_ as identification and who did not take an oath.

\_\_\_\_\_  
 Signature of Notary  
  
 \_\_\_\_\_  
 Print Name

**PETITION FORM FOR OTHER PROPERTY OWNERS**

1.   Signature: \_\_\_\_\_   Property Tax ID#: \_\_\_\_\_  
      Mailing Address: \_\_\_\_\_  
 2.   Signature: \_\_\_\_\_   Property Tax ID#: \_\_\_\_\_  
      Mailing Address: \_\_\_\_\_  
 3.   Signature: \_\_\_\_\_   Property Tax ID#: \_\_\_\_\_  
      Mailing Address: \_\_\_\_\_  
 4.   Signature: \_\_\_\_\_   Property Tax ID#: \_\_\_\_\_  
      Mailing Address: \_\_\_\_\_  
 5.   Signature: \_\_\_\_\_   Property Tax ID#: \_\_\_\_\_  
      Mailing Address: \_\_\_\_\_  
 6.   Signature: \_\_\_\_\_   Property Tax ID#: \_\_\_\_\_  
      Mailing Address: \_\_\_\_\_  
 7.   Signature: \_\_\_\_\_   Property Tax ID#: \_\_\_\_\_  
      Mailing Address: \_\_\_\_\_  
 8.   Signature: \_\_\_\_\_   Property Tax ID#: \_\_\_\_\_  
      Mailing Address: \_\_\_\_\_  
 9. Signature: \_\_\_\_\_   Property Tax ID#: \_\_\_\_\_  
      Mailing Address: \_\_\_\_\_  
 10. Signature: \_\_\_\_\_   Property Tax ID#: \_\_\_\_\_  
      Mailing Address: \_\_\_\_\_

<b>FOR OFFICE USE ONLY:</b> <b>DATE RECEIVED AT DSEM:</b>	<b>STREET NAME OPTION APPROVED:</b>
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