



CITY OF BUELLTON

STREET ADDRESS APPLICATION and PROCEDURES

The City of Buellton is the agency responsible for issuing and/or changing all addresses within its jurisdiction.

To begin the process of establishing or changing an address, please fill out the attached Street Address Application form and return it to:

**City of Buellton
Planning Department
P.O. Box 1819
Buellton, CA 93427**

Fees – Are for new or additional addresses only. There is no charge for address changes or verifications.

\$45.00 for the first address – Waived if Address Application is turned in with Zoning Clearance application and fee.

\$2.00 for each additional address if request is made at the time of the initial address request.

Upon receipt of your complete application, your request will be reviewed and your address or addresses will be issued. An address assignment notice will be provided.

Please call (805) 688-7474 if you have questions.

Please make check payable to City of Buellton. Include payment with application form.

PLEASE NOTE

The Fire Department requires suite addresses for commercial units to contain numbers instead of letters, i.e. Suite 101, 102 etc. For accessory dwelling units (ADUs), letters should be used i.e. “B” for detached and attached ADUs and “C” for junior ADUs.

Address assignment will be finalized upon receipt of payment and staff review. In order to expedite our address assignment, please include the Assessor Parcel Number.

CITY OF BUELLTON
Planning Department
P.O. Box 1819
Buellton, CA 93427
(805) 688-7474

STREET ADDRESS APPLICATION

Date: _____

PROPERTY OWNER : _____

Mailing Address: _____

Fax: _____ Telephone: _____ Email: _____

Applicant (if different from owner: _____

Mailing Address: _____

Fax: _____ Telephone: _____ Email: _____

ASSESSOR PARCEL NO. (APN): _____ - _____ - _____

ADDRESS TYPE (please check one)

- | | | |
|--|--|---|
| <input type="checkbox"/> New Residential | <input type="checkbox"/> Additional Residence(s) | <input type="checkbox"/> Change Residential |
| <input type="checkbox"/> New Commercial | <input type="checkbox"/> Accessory Dwelling Unit (ADU) | <input type="checkbox"/> Change Commercial |
| | <input type="checkbox"/> Additional Commercial | |

ADDRESS TO BE REVIEWED: _____

Please provide a drawing or map showing location of access road and relative location of parcel

COMMENTS: _____

Copy of Address Assignment to Applicant Owner

PAYMENT \$: _____ Check # _____ or Cash Payment: _____

INCLUDED IN ZONING CLEARANCE FEE: _____ Check # _____ Date: _____

TO BE COMPLETED BY BUELLTON CITY STAFF

ADDRESS ISSUED: _____
Street Number/Name

Reviewed by: _____ Title: _____ Date: _____

Comments: _____