

Request to Name an Existing Unnamed Street/Easement

Application Fee (non-refundable): \$100.00 (The Applicant is responsible for all sign costs.)

Make checks payable to Washoe County.

Applicant Information

Name: _____

Address: _____

Phone (H): _____ Phone (W): _____

Private Citizen

Agency/Organization

Street Name Requests

(No more than 14 letters or 15 if there is an "i" in the name. Attach extra sheet if necessary.)

Location (APN)	First Choice	Second Choice

Location

General Location: _____

Reno

Sparks

Washoe County

General Information

Approximate number of structures addressed on street: _____

Reason for request: _____

Please attach check, maps, petitions and supplementary information.

Approved: _____ Date: _____

Regional Street Naming Coordinator

Except where noted

Denied: _____ Date: _____

Regional Street Naming Coordinator

Washoe County Department of Public Works

Post Office Box 11130 - 1001 E. Ninth Street
Reno, NV 89520-0027

Phone: (775) 328-3667 - Fax: (775) 328-6133 - Email: streetnames@washoecounty.us