

Office Use Only
New Number Allocated: _____

Number Request*(please tick appropriate box)*

New Number

Replacement Number

The application fee of \$42.00 (refer to [Fees and Charges](#)) must accompany this form.

Location of Property

Road Name:

Locality:.....

Valuation Number:.....

Legal Description:

Area (approx.):.....

Other Details:.....

Location of Entrance

In relation to neighboring entrances, start of road, bridges, etc. **and** in relation to property boundary.
(e.g. near western end of boundary approx. 300m from number 716)

.....

.....

Enquirers Details

Name:

Address:.....

..... Phone Number:

Received by: Date:

Receipt No.

Please return Completed Form to council@kaipara.govt.nz or post it to:

Kaipara District Council
Roding Team
Private Bag 1001
Dargaville 0340

Attention: Customer Services