

STREET NAMING AND NUMBERING APPLICATION FORM

APPLICANT DETAILS				
Applicant Name				
Applicant Address				
Applicant Tel. Number				
Applicant Email Address				
PROPERTY / DEVELOPMENT DETAILS				
Number of Plots to be addressed				
Expected Date of Occupancy				
Planning Permission Number				
Details of Properties Requ Addressing, (i.e. provide of	details of			
proposals, including deta properties to be demolis relevant).				
Suggested name for Apart				
Block Name(s) (if relevant) will be checked for suita				
SMBC.				
Proposed New Road Nam (requires approval by Pa Council/Ward Members)				
SUPPORTING INFORMATION				
SUPPORTING INFORMA	TION	1		
SUPPORTING INFORMA CHECKLIST	TION	1	PLEASE TICK	FORM AT
	TION	1	PLEASE TICK	FORM AT
CHECKLIST	TION	1	PLEASE TICK	FORM AT
CHECKLIST Location Plan	TION	1	PLEASE TICK	FORM AT
CHECKLIST Location Plan Site Layout Plan	TION	1	PLEASE TICK	FORM AT
CHECKLIST Location Plan Site Layout Plan Apartment Floor Plans		ral (new road	PLEASE TICK	FORM AT
CHECKLIST Location Plan Site Layout Plan Apartment Floor Plans Location of letterboxes Parish Council / Ward Men	hber approv ARE PREFI WILL NEEL	ERRED IN ELECTR	ONIC FORMAT. SITE LA	YOUT PLANS AND
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Please return completed applications to: Street Naming & Numbering Council House, Manor Square, Solihull, B91 3QB. Or via email at: streetnaming&numbering@solihull.gov.uk