



## Street Naming and Numbering Application Form

Public Health Act 1925, sections 17 to 19

**Complete this form for a new development of two or more plots**

SNN3: Multi plot  
form

### Applicant details

Title:	First name:	Surname:
Company name: (if applicable)	Client name: (if applicable)	
Address:		
Town:	Postcode:	
Email:	Telephone:	
Planning application reference (see guidance):		

### Site and location details (see guidance)

Site: Name of development:	Number of plots:
Type of development: <input type="checkbox"/> New builds <input type="checkbox"/> Conversions <input type="checkbox"/> Conversions and new builds	
<b>Location of development</b>	
<b>Are you building or converting properties within the boundary of an existing property?</b>	
If <b>YES</b> , please provide the address of this property:	
Number or name of existing property:	
Road or street name:	
Locality, e.g. Magor (if relevant):	
Town:	Postcode:
Does the new development share an access with this property? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If <b>NO</b> , (i.e. the properties DO NOT fall within the boundary of an existing property) please provide the following information:	
Road from which new development will be accessed:	
If the road is unnamed, please ensure that access is clearly marked on your accompanying plans.	
Locality:	Town:
Postcode of nearest property (or grid reference):	
<b>Please remember to include your location and layout plans when submitting your application.</b>	

### Property status (see guidance)

<b>Are the properties:</b> <input type="checkbox"/> Commercial? <input type="checkbox"/> Residential? <input type="checkbox"/> Mix of commercial and residential?
<input type="checkbox"/> I enclose evidence that the build is complete; please add the new addresses to PAF (see guidance)



**Proposed property names (See guidance)**

*Please ensure that you have read the guidance and are aware of the rules regarding numbers versus names, as well as those surrounding the importance of originality on the subject of names.*

Is your new development on an existing, numbered street?  Yes  No

If **YES**, names are optional; if you still wish to choose names, please use the space below;

If **NO**, please use the space below to indicate your chosen names:


**Proposed road names (where applicable)**

Does the new development include one or more new roads?  Yes (**please see guidance**)  No

If new road names are required, would you like the Street Naming and Numbering authority to choose them?  Yes  No  
If you have ticked **No**, please ensure you read the relevant guidance and use this space to record your proposals.


**Applicant's declaration and payment**

Amount owed (see guidance): £ Date of payment:

Method of payment:  Card Receipt no: WP:  BACS: Ref no: HD:  Cheque

**Please note that we will not begin work on your application until your fee has been paid in full**

- I hereby apply for Street Naming and Numbering services as detailed in this application and declare that the information given on this form is correct and true to the best of my knowledge;
- I confirm that I have read the relevant guidance;
- I have enclosed detailed plan showing the location of and access to the new builds;
- I have paid the full amount by the method indicated above

Print full name(s):

Signature(s): Date: