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TOWN OF DEDHAM

Commonwealth of Massachusetts



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DEPARTMENT OF INFRASTRUCTURE ENGINEERING

When construction of any new development is proposed, a request for address assignment is required. New addresses are assigned consistent with the existing addresses and the town addressing standards and regulations. If a building is being demolished the building address is retired and a new address assigned to the new development. Addresses are not assigned to vacant land when no work is proposed.

It is required to submit address request prior to permitting. The GIS Manager will determine and assign a valid address(es), according to town regulations. If necessary, the GIS Manager shall also tentatively assign new parcel identification numbers for approval by the Assessor's Department. Upon approval of the parcel identification numbers the property, building, or structure will then be eligible for permitting and/or licensure.

Once addresses are assigned an addressing notice is prepared and sent to our distribution list that includes the post office, town departments, and emergency services.

Requirements:

- A completed Request for Address Assignment form. This form must be signed by the property owner, or his/her legal representative. A tenant cannot sign for a property owner.
- Site plan showing the property lines, building footprint and entrance to the building.
- Floor plans are required for changes in suite or unit numbering.
- Based on the scope of work, other supporting documents may be required.
- Obtain signature from Building Department.
- Obtain signature from Planning & Zoning Department.
- After obtaining Building and Planning & Zoning Department's signatures, submit the Address Request Application to the GIS Department located at 55 River Street in the DPW Building.
- In some situations, Fire and Police Departments approval is required before the address is assigned.

Failure to apply for the Address Assignment application with appropriate signatures, may delay the issuance of Building and other necessary permits.

Changing existing addresses:

Because so many agencies and service providers are affected, we do not change existing address numbers based on their perceived beneficial properties and/or cultural preferences. Existing address numbers can only be changed for one of the following reasons:

- The existing address number is out of sequence with the adjacent addresses
- Entry change on a corner lot with building permits for a remodel
- You have documented difficulty receiving emergency services or mail delivery

Limitations:

- Addresses are not assigned to empty lots or vacant land.
- Addresses will only be assigned when new development or alteration work is proposed.

Addressing Contact:

Rose O'Connor, GIS Technician Phone: 781-751-9391

Email: roconnor@dedham-ma.gov

**TOWN OF DEDHAM
REQUEST FOR ADDRESSING ASSIGNMENT**

In order to process your request for address assignment, all applicable information must be completed. A complete site plan is required to process your request. Submittal requirements will vary based upon the proposed scope of work. Additional documents may be required.

If no work is proposed, a request for change of address can only be granted for one of the following reasons:

- Address is out of sequence
- Existing entrance on a corner lot is on a different street
- Documented difficulty receiving mail or emergency service

PROPERTY INFORMATION

Current Parcel ID _____ Property Address: _____

Request For: () New Address () Add Address () Change Address () Add Suite

Building Use: (check one)

- () Single Family () Duplex () Condominium () Apartment () Office () Retail/Store () Mixed Use
() Other (please specify) _____

Number of Residential Units: _____

Number of Non-Residential Units: _____

Describe Reason for Address request: _____

TO BE COMPLETED BY OWNER/AUTHORIZED AGENT

Owner Name: _____ Company Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: (____) _____ Email: _____@_____

Signature: _____ Date: _____

TO BE COMPLETED BY APPLICANT (If different from above)

Applied For By: () Developer () Architect () Engineer () Contractor

Name: _____ Company Name: _____

Phone: (____) _____ Email: _____@_____

BUILDING DEPARTMENT

PLANNING & ZONING DEPARTMENT

Date Received: _____

Date Received: _____

Approved: _____

Approved: _____

Not Approved: _____

Not Approved: _____

Notes: _____

Notes: _____

Signature: _____ Date: _____

Signature: _____ Date: _____

GIS DEPARTMENT

Date Received: _____ Address Assigned: () Yes () No

Notes: _____

Signature: _____ Date Issued: _____