



WOODFORD COUNTY ZONING DEPARTMENT

115 N. Main St. Room 100 Eureka, IL 61530 309-467-3023

email: wczoning@woodford-county.org

APPLICATION FOR 9-1-1 ADDRESS IN UN-INCORPORATED WOODFORD COUNTY

Name of street or road _____

Township _____ Parcel ID # _____

Subdivision _____ Lot _____

Name of property OWNER _____

Name of BUILDER OR CONTRACTOR _____

Name of APPLICANT (if different) _____

Current mailing address _____

City _____ State _____ Zip _____

Phone _____ E-mail _____

Signed _____ Date _____

Please include an Aerial map indicating the entrance location.

<http://www.centralilmaps.com/woodfordgisWAB/>

County Highway/Road Commissioner _____ Date _____

**County Highway or Road commissioner MUST SIGN,
IDOT entrances please provide IDOT access approval**

Upon access approval from appropriate highway commissioner, mark the driveway with stakes and/or flags (at the road) to ensure proper address assignment at correct location.

The fee for this service and equipment is \$55.00. The fee is to be submitted along with the application. You are required to pick up the sign, post and bracket at the Zoning office and install them per the required instructions at your expense.

You are required to contact J.U.L.I.E. two working days in advance before digging or setting your post at 1-800-892-0123 or www.illinois1call.com

-----FOR STAFF USE ONLY-----

YOUR NEW ADDRESS IS: _____ City _____

Contact the County Clerk if this is a new/renamed roadway

Zoning Approval _____ Date _____

E-911 Approval _____ Date _____

POLICE _____ FIRE _____ EMS _____

Send to: FHP Date paid: _____

9-1-1 Health Department

Assessor Metamora (61548, 61545, 61570) Receipt # _____ \$ _____

Applicant Scanned

Zoning Date picked up: _____

Picked up by: _____