



1. ADDRESS REQUEST INFORMATION

New Address Change of Address Address Verification Suite / Unit / Building Number(s) Utility Address

2. PROPERTY OWNER INFORMATION

Property Owner Name: _____

Property Owner's Current Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

3. LOCATION OF PROPERTY

Subdivision: _____ Unit: _____ Lot: _____ Block: _____

Survey Name
(Not Applicable if Within Subdivision): _____ A- _____ SUR- _____ Acreage: _____

Appraisal District
Property ID/Account Number: _____ Name of road from which the
property is primarily accessible: _____

4. SITE PLAN

Attach a site plan or provide a drawing below showing the proposed and/or existing location of structure(s) and access point(s). ([Example](#))

5. SIGNATURE OF PROPERTY OWNER

This information is compiled and made available as a public service by Comal County, Texas. However, Comal County makes no warranty as to the accuracy, reliability, or completeness of the information and is not responsible for any errors or omissions or for results obtained from the use of the information. Distribution of the information does not constitute such a warranty. Use of the information is the sole responsibility of the user.

I, (Print Name) _____, the undersigned, have carefully reviewed this application and my answers to all questions. To the best of my knowledge, the answers are all true and correct. In addition, I affirmatively consent to the online posting/public release of my e-mail address associated with this application, as applicable.

SIGNATURE of Property Owner: _____ Date: _____

6. SUBMIT COMPLETED FORM

Comal County Address Coordinator Email: address@co.comal.tx.us or Fax To: 830-643-3810

The property owner will receive an address letter and map to the e-mail address provided above, please allow 7-10 days to process the request.