

# COUNTY ROAD NAME CHANGE REQUEST FORM

|  |                          |                   |   |
|--|--------------------------|-------------------|---|
| Date:  |                          | Requestor:        |   |
| Emergency Service Zones:   |                          | Address/Phone:    |   |
|  |                          | City, State, Zip: |   |
| Proposed Road Name:  |                          |                   |   |
| Current Road Name (If Any):  |                          |                   |   |
| Location of Road:  |                          |                   |   |
| County Road  | <input type="checkbox"/> | Public Road       | <input type="checkbox"/>                  |
| Private Road   | <input type="checkbox"/> | Section:          | Township: Range:                          |
| Name Starting at:  |                          | Name Ending at:   |   |
| Direction and Distance from Nearest Public Road Intersection, Include Names of Intersecting Roads:   |                          |                   |   |
| For County Use Only  |                          |                   |   |
| Date Received:   |                          | Criteria Met:     | <input type="checkbox"/> Section 8.40.090 |
| Comments:  |                          |                   | <input type="checkbox"/> Section 8.40.100 |
|  |                          |                   | <input type="checkbox"/> Section 8.40.110 |
|  |                          |                   | <input type="checkbox"/> Section 8.40.120 |
| Will Road Require Readdressing: <input type="checkbox"/> Yes <input type="checkbox"/> No   |                          | If No, Reason:    |   |
| Listed Landowners Verified: <input type="checkbox"/> Yes <input type="checkbox"/> No (See list on reverse)   |                          |                   |   |
| Percentage of Landowners Approving: _____ %  |                          |                   |   |
| As the county's agent for reviewing the proposed road name in view of the established criteria I hereby<br><input type="checkbox"/> recommended approval of this proposal as indicated.<br><input type="checkbox"/> do not recommend approval of this proposal as indicated. |                          |                   |   |
| Signed:  | Title:                   | Date:             |   |
| Signed:  | Title:                   | Date:             |   |

The Board of County Commissioners acting in their capacity as the legislative body of Lincoln County hereby approve/deny the request for the establishment or change of the name of the above identified County/Public road.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 200\_\_ in Davenport, Washington.

**BOARD OF COUNTY COMMISSIONERS  
OF LINCOLN COUNTY, WASHINGTON**

**ATTEST:**

\_\_\_\_\_  
Chairman – Ted Hopkins

\_\_\_\_\_  
Clerk of the Board - Shelly Johnston

\_\_\_\_\_  
Vice Chairman – Dennis Bly

By: \_\_\_\_\_  
Deputy Clerk of the Board - Dale Vaughn

\_\_\_\_\_  
Member – Deral Boleneus

