



CITY OF KINSTON
Inspections and Code Enforcement

Post Office Box 339 / 205 East King Street

Kinston, North Carolina 28502

Phone: 252-939-3265 ~ Fax: 252-939-3127

Request for Address Assignment

In order to process your request for address assignment, all applicable information must be complete. 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.

Applicant Name: _____

Property Owner **Tenant** **Contractor** **Developer**

Phone: _____ **Email:** _____

Property Owner Name: _____

Phone: _____ **Email:** _____

N C PIN _ _ _ - _ - _ **or 12 Digit Pin** _ _ _ _ _

Building Use:

___ **Single Family** ___ **Duplex** ___ **Condominium** ___ **Townhouse** ___ **Apt**

___ **Office/Bank** ___ **Retail/Store** ___ **Recreational** ___ **Hotel/Motel**

___ **Church** ___ **Educational** ___ **Medical Building** ___ **Restaurant**

___ **Industrial** ___ **Assembly**

Applicant
Signature: _____ **Date:** _____