



Town of Lee

911 NUMBER APPLICATION

PLEASE COMPLETE THIS FORM IN ITS ENTIRETY TO OBTAIN A 911 NUMBER. ALL INFORMATION MUST BE PRINTED CLEARLY.

1. Applicants name (must be the owner of property) _____
2. Mailing address _____
3. Telephone _____ E-Mail _____
4. Name of road where property is located _____
5. Name of closest intersecting road _____
6. Distance in feet from the closest intersecting road to proposed or existing driveway as shown on the driveway permit _____
7. From closest intersection, which side of the road is your property, Left or Right _____
8. Assessors Map _____ Lot _____
9. Is there a site plan attached indicating where the driveway will be located _____
10. Is there a copy of the assessors map indicating the location of the building lot _____
11. Is a copy of the driveway permit attached _____
12. Is this on a private or public road _____

Signature of Applicant Date

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911 Number _____ on _____ Road

Please return the completed form to the Board of Assessors Office

Telephone (413) 243-5512 Fax (413) 243-5523