

STREET NAME CHANGE APPLICATION



TRANSPORTATION
PUBLIC WORKS

APPLICATION FOR STREET NAME CHANGE

Please fill in items 1-6 and return to: City of Austin
Transportation and Public Works Department
Community Services Division/ OTC 5th floor Suite 530
Attn: Claudia Padgett
P.O. Box 1088
Austin, Texas 78767-1088

OR email the completed form to:
claudia.padgett@austintexas.gov

1. Applicant: _____
2. Contact Information:

Address: _____

Phone: _____ E-mail: _____
3. Existing Street Name: _____
4. Proposed Street Name: _____
5. Limits of proposed street name change:

From: _____

To: _____
6. Reason for request (as listed in [City Code §14-5-4](#)):

OFFICE USE ONLY:

Date Received: _____ Case Number: _____

Jurisdiction: _____ Austin Map Grid: _____ Tax Map: _____

Council/Mayor Initiated: _____ Zip code: _____