



TOWN OF CLAYTON
Engineering & Inspections
111 E. Second St., P.O. Box 879
Clayton, NC 27528
Phone: 919-553-5002
Fax: 919-553-1720

STREET NAME CHANGE PETITION COVER SHEET

Current Street Name: _____ Date: _____

Proposed Street Name: _____

Applicant's Name: _____

**In the event the Town of Clayton Council chooses to adopt a resolution to change the street name, petitioner(s) and individual property owner(s) will be responsible for the cost of changing their address.*

The following checklist to be completed by applicant:

- [] **Recorded Plat and Johnston County Property Identification Map from MapClick** – Petitioner(s) must obtain a recorded plat showing the street petitioned to be renamed from the Johnston County Registrar's Office and Johnston County Property map from the Johnston County MapClick website showing the existing roadway to be renamed and all abutting properties.
- [] **Description of the Street or Alley** – The petitioner(s) must list the description of the street or alley (located on page 1 of the petition application, and give his/her name, address, city, state, zip code and telephone number.
- [] **List of Abutting Property Owner's** – The parcel identification number, names and addresses of the property owner's abutting the street right-of-way should be listed on Page 1 and 2 of the petition application. The petitioner(s) should obtain the signature of EACH abutting property owner listed on the petition.

Please read the petition and all other information within the application and coversheet carefully. It is important that you understand what you are signing and how it will affect you.

- Find your property on the enclosed map. Each lot is assigned a number and you must sign opposite the number that indicates your lot. If you own more than one affected property, you must sign beside each parcel listed that you own.
- Make sure your deed and the petition map's road frontage correspond with one another. If there is a discrepancy, write the road frontage noted on your deed in the space provided on the petition.
- Sign the petition as signed on the deed. If there are multiple owners, signatures must be listed in the same manner as on the deed.
- If you are signing on behalf of a corporation, give your title and place your corporate seal over your signature.

Applicant Signature: _____

Reviewed by: _____



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STREET NAME CHANGE PETITION APPLICATION

Note: Incorrect signatures are not binding on the petition and may cause delays in processing. If you have any questions, call the Town of Clayton Planning Department at (919) 553-5002.

Applicant Name: _____ Date: _____

Applicant Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Description of portions of street (to be changed): _____

Reason for changing the name of this street: _____

****MapClick and Recorded Plat – APPLICANT MUST attach a copy of MapClick map which shows the subject street or alley and surrounding properties and a recorded plat showing the subject street.**

PARCEL INFORMATION

We, the undersigned property owners, owning land abutting the street or alley shown on the attached map, hereby petition the Clayton Town Council to change the name.

From: _____ To: _____ Date: _____

The parcel identification numbers below refer to parcels on the attached map.

Date of Map: _____

Parcel Identification Number		Road Frontage (from Deed)	
Property Owner			
Mailing Address			
City	State	Zip	
Signature			
Parcel Identification Number		Road Frontage (from Deed)	
Property Owner			
Mailing Address			
City	State	Zip	
Signature			

Parcel Identification Number		Road Frontage (from Deed)	
Property Owner			
Mailing Address			
City	State	Zip	
Signature			
Parcel Identification Number		Road Frontage (from Deed)	
Property Owner			
Mailing Address			
City	State	Zip	
Signature			
Parcel Identification Number		Road Frontage (from Deed)	
Property Owner			
Mailing Address			
City	State	Zip	
Signature			
Parcel Identification Number		Road Frontage (from Deed)	
Property Owner			
Mailing Address			
City	State	Zip	
Signature			
Parcel Identification Number		Road Frontage (from Deed)	
Property Owner			
Mailing Address			
City	State	Zip	
Signature			
Parcel Identification Number		Road Frontage (from Deed)	
Property Owner			
Mailing Address			
City	State	Zip	
Signature			
Parcel Identification Number		Road Frontage (from Deed)	
Property Owner			
Mailing Address			
City	State	Zip	
Signature			

Office Use Only

File #: _____ Received Date: _____

Received By: _____