

Street Name Application

Applicant Name: _____

Mailing Address: _____

Phone Number: _____

Street Name choices:

1st _____

2nd _____

3rd _____

Note: If the chosen name is that of a person, a summary of their contributions to the community must accompany the application. The application will require the approval of the City Council/County Commissioners.

Applicant Signature: _____ Date: _____

All residents/property owners must sign the petition to express agreement or disagreement of choice(s).

Total number of residences/businesses on street: _____

Road location - Describe the location of the road. Be as specific as possible, making reference to direction and major intersection(s). *Example: extends east of Main Avenue, north of County Road.*

Is street private or public? _____

Return application to:

City-County Planning Board
Attn: Ben F. Stamey, Jr.
100 E. First Street
Winston-Salem, NC 27102