

## Checklist

### For Recorded Subdivision Map

- ☐ Original signed application
- ☐ Copy of the application
- ☐ 1 copy of recorded map
- ☐ 1 copy of list of approved street names from  
City of Las Vegas Fire Communications Center
- ☐ Email AutoCAD (.dwg) drawings of the  
entire subdivision to LandDivisionMaps@  
cityofhenderson.com with ONLY the following  
data ON SEPARATE LAYERS using the naming  
convention shown in quotation marks:

- Property Boundaries - "Layer: Property\_Lines"
- Right of Way Lines - "Layer: ROW"
- Street Center Lines - "Layer: SCL"
- Street Names - "Layer: ST\_NAMES"

All other extraneous data such as utility info,  
contour lines, etc must be removed from the  
drawing before submittal.

Please include at least TWO STREET CENTERLINE  
INTERSECTIONS OF MAJOR ROADS located  
adjacent to the project for the purpose of  
moving and rotating your data to fit ours, as well  
as a project location map clearly showing the  
general location of the development.

### For Commercial Addressing

- ☐ Original signed application
- ☐ 1 copy of site plan

### For All Other Addressing

- ☐ Original signed application
- ☐ 1 copy of site plan showing the location  
of the address request
- ☐ 1 copy of any other documents related  
to the address request

## Submittal Process

NOTE: Completed applications must be  
submitted electronically through DSC Online  
at [dsconline.cityofhenderson.com](http://dsconline.cityofhenderson.com).  
Please email [DSCOnlineSupport@  
cityofhenderson.com](mailto:DSCOnlineSupport@cityofhenderson.com) if you have any  
questions about using DSC Online.

# Addressing



## Application Form



## Community Development and Services

240 Water St.  
P. O. Box 95050  
Henderson, NV  
89009-5050

Phone: 702-267-1500

Fax: 702-267-1501

[cityofhenderson.com](http://cityofhenderson.com)



# Addressing

## Application Form

Project Name: \_\_\_\_\_

Project Location: \_\_\_\_\_

Assessor's Parcel Number(s): \_\_\_\_\_

(Residential) CFMA# \_\_\_\_\_

(Commercial) CDRA#/CZCO#/ or CZCA# \_\_\_\_\_

(Irrigation meters, pedestals, street lights, signs) PCVL# \_\_\_\_\_

Applicant

Name \_\_\_\_\_ Company \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ ZIP Code \_\_\_\_\_ Phone (    ) \_\_\_\_\_

Email \_\_\_\_\_

Contact Person

Name \_\_\_\_\_ Company \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ ZIP Code \_\_\_\_\_ Phone (    ) \_\_\_\_\_

Email \_\_\_\_\_

Fax (    ) \_\_\_\_\_ Alternate Phone (    ) \_\_\_\_\_

The person listed as contact will be contacted to answer questions regarding this application, provide additional information when necessary.

Applicant Signature \_\_\_\_\_

Print Name \_\_\_\_\_

For Office Use Only									
CADD#									
Accepted by									
Date									