



August 29, 2000

Nueces County 9-1-1 Address Verification Form

IMPORTANT: Information is being gathered to help emergency service personnel respond to 9-1-1 calls. This form must be completed for all habitable structures in the unincorporated areas of the County. **Forms should be completed, signed and returned to the County at the following address:**

Nueces County Department of Public Works
901 Leopard, Suite 103
Corpus Christi, Texas 78401

The information herein will not be released to mass marketing firms or to market research firms or salespersons of any kind.

SECTION 1 – ADDRESS INFORMATION

Present Address: _____ Apt: _____ ZIP: _____

Mailing Address: _____

9-1-1 Issued Address: _____ COMMUNITY NAME _____

STRUCTURE: _____ WOOD HOUSE _____ 2 STORY HOUSE COLOR _____

_____ BRICK HOUSE _____ 2 STORY BRICK HOUSE

_____ MOBILE HOME _____ DOUBLE-WIDE MOBILE HOME

OTHER (PROVIDE DESCRIPTION HERE) _____

SECTION 2 – OCCUPANT INFORMATION

Phone: _____ Unlisted number? Y N _____ Residential Business
Telephone Company: _____

Occupant's Name: _____

Occupant's Ages: _____ Under 5 _____ 5 to 18 _____ 18 to 65 _____ Over 65

Identify any physical disabilities or any special medical condition for all occupants:

List any flammable or hazardous materials stored on premises:

SECTION 3 – RELEASE STATEMENT

I authorize the storage and use of the above information for the purpose of locating my family and me; assisting us in time of disaster, intrusion or conflict; and for providing 9-1-1 related services or response for emergencies. I understand that the following will have access to this information: Public Safety Personnel; Dispatchers; Database Administrators; 9-1-1 Network Personnel; Administrative Staff; and Backup Agencies. Further, I understand that access will be based on a need to know basis for performing essential services. I agree to provide change of address or conditions to my area's dispatcher or release updated information.

OCCUPANT'S SIGNATURE _____

DATE _____