



# Sequatchie County E911 District

Brian Ruehling – Executive Director – 426 Cedar St. Dunlap TN, 37327  
Phone: (423) 949-9912 – Fax: (423) 949-7045



## NEW ROAD NAME REQUEST / CHANGE FORM

We, the undersigned, request a new road name or road name change for E911 emergency purposes. We understand that all the residents and/or property owners on this new road are all in agreement with these names.

**We understand that there is a \$200 road name fee for all new roads or road name changes.**

We understand that if we wish to make the said road a city street or a county road, it will have to meet their guidelines. It will also need to be approved by the City/County Road committees as well as the City/County Commission. Doing so is a separate process not associated with this form or establishment.

We are submitting first, second and third choices for review. Starting with the first choice, E911 will check for duplications or naming issues. If a duplication or issue is found, E911 will move to the second choice and so on. If all three are found to be duplications or have issues, resident(s) will be required to submit three more choices.

*Avoid first and last names as these are not allowed due to multiple individuals could have the same name. Property often changes owners and new owners will be inclined to try and rename the road if a persons name is used. Avoid using common names such as different trees, lakes, rivers by themselves as these are not allowed. Common words are poor choice. Avoid names that rhyme, are hard to pronounce, and names that can be spelled multiple ways. No variation in spelling a word is allowed. Cow, Kow, Be, Bee, and etc.*

First Choice: \_\_\_\_\_

Second Choice: \_\_\_\_\_

Third Choice: \_\_\_\_\_

☐ Approved by E911, no issues

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**Internal Office Use Only**

Signed: All landowners that have land connecting to road.

_____ Signature	_____ Print	_____ Address
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_____ Signature	_____ Print	_____ Address
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_____ Signature	_____ Print	_____ Address
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_____ Signature	_____ Print	_____ Address
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Primary Requestee Name: \_\_\_\_\_ Date: \_\_\_\_\_

E-Mail: \_\_\_\_\_ Phone: \_\_\_\_\_

GIS Staff  
**Mapping@SequatchieCountyTN.gov**  
423-949-MAPS (6277)