



# PEI Geographic Names Change Request Application

Application for approval to add, withdraw or modify a Geographic Place Name

**Mail to:**

Department of Finance  
Taxation and Property Records  
PO Box 1150, Charlottetown, PE C1A 7M8  
Tel: (902) 368 4070 Fax: (902) 368 6584

**Deliver to:**

95 Rochford Street  
Shaw Building, 1<sup>st</sup> Floor  
Charlottetown, PE C1A 3T6

***Freedom of Information and Protection of Privacy***

Personal information provided in this application is being collected under the authority of clause 31(c) of the Freedom of Information and Protection of Privacy Act R.S.P.E.I. 1988, Cap. F-15.01, for the purpose of assessing applications for naming or renaming under PEI's Place Naming Program. This personal information will be used to identify the applicant and provide the notices required under the Program. Personal information may also be used to contact the applicant for the purposes of clarifying the information submitted and to request any additional information which is required for the application. For more information about how personal information is collected, used and disclosed by the Department of Finance please contact Taxation and Property Records 902-368-4070.

**1. Please select Change Request Type:**

<input type="checkbox"/> <b>Add Name</b> (add a new official name)	Proposed Name: _____
<input type="checkbox"/> <b>Withdraw Name</b> (official name no longer in use)	Name: _____
<input type="checkbox"/> <b>Modify Name</b> (alter the spelling, change possessives or change generic)	Current Name: _____ Proposed Name: _____
<input type="checkbox"/> <b>Modify Location</b> (change the latitude/longitude, boundary, extent, or headwaters while retaining the name)	Current Coordinates: _____ Proposed Coordinates: _____

**2. Please select Geographic Place Type:**

- |   |   |
|---|---|
| <input type="checkbox"/> Community / Locality | <input type="checkbox"/> Town               |
| <input type="checkbox"/> City                 | <input type="checkbox"/> Rural Municipality |

**3. Where is this place located on a map?**

County: _____	Town / Municipality: _____
Community: _____	
Geographic Coordinates: (Datum NAD83 – Latitude/Longitude)	_____
Map Sheet: (If known, provide the 1:50 000 scale topographic map)	_____
Define Place Extent (please attach an additional page if necessary):	
1. Describe the extent of the place to ensure accurate definition of geographic location and size.	
2. Is there a known historical place name (Mi'kmaq, French Regime, etc.)?	

3. Describe any background research conducted on the place (please cite government databases, historical records, etc.).
4. Please attach letters, notes, etc. demonstrating community support for the name change request.
5. Please submit a map outlining the place or geographic feature in question (to ensure accurate location).

**4. Why is this addition or change important?**

(Please review 'PEI's Guiding Principles' at [princeedwardisland.ca/naming](http://princeedwardisland.ca/naming) prior to completing this section of the application to ensure your request meets the guidelines)

**5. What is the origin and meaning of the suggested name or new location and how does it align with the guiding principles?**

(Please review 'PEI's Guiding Principles' at [princeedwardisland.ca/naming](http://princeedwardisland.ca/naming) prior to completing this section of the application to ensure your request meets the guidelines)

**6. Who is submitting this request?**

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

Address: \_\_\_\_\_

Business Name: \_\_\_\_\_  
(if applicable)

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**By submitting this application, the applicant certifies and agrees as follows:**

- I am responsible for carrying out the activities as described in this application form.
- The information I have submitted is true to the best of my knowledge.
- I consent to the Government of PEI using the information, including my personal information, contained in the application for the purposes of assessing applications for naming or renaming under PEI's Place Naming Program, which use may include disclosure to the public. The personal information provided in this application will be used to identify me and provide the notices required under the Program. My personal information may also be used to contact me for the purposes of clarifying the information submitted and to request any additional information which is required for the application.

**Please return completed application to:**

**PEI Geographic Names Program**

c/o Department of Finance, Taxation and Property Records  
95 Rochford Street, PO Box 1150  
Charlottetown, PE C1A 7M8

Fax: (902) 368-6584  
Email: [naming@gov.pe.ca](mailto:naming@gov.pe.ca)

**Questions :**

Phone : (902) 368-4070  
Email: [naming@gov.pe.ca](mailto:naming@gov.pe.ca)  
Web : [princeedwardisland.ca/naming](http://princeedwardisland.ca/naming)

**For Office Use Only**

Received by: \_\_\_\_\_

Application Status: Approved ☐ Denied ☐

Date Received: \_\_\_\_\_

Reason: \_\_\_\_\_