

CITY OF MOUNT CLEMENS

VACANT OR ABANDONED PROPERTY REGISTRATION FORM

Dwelling Address: _____

Owner's Full Legal Name: _____

Owner's Mailing Address: _____

Owner's Telephone Number: _____

Owner's Driver's License Number: _____

Owner's Date of Birth: _____

(If property is owned by a corporation, please provide the above information for the registered agent or person legally responsible)

Full legal name of Property Manager (if any): _____

Mailing address of Property Manger: _____

Telephone number of Property Manger: _____

Does the Property Manager have authority to enter and secure the premises? (Explain any restrictions on Manager's authority with regard to property): _____

Number of apartments/units in this building when in use: _____

(Vacancies of 1 year or more may result in the loss of status as a non-conforming multi-family)

Estimated time that the property will remain vacant: _____

Reason for Vacancy: _____

What are your plans for the restoration, reuse or removal of any structures on this site?
Approximate time to complete plans?

(Please note, fees may be waived if there is a valid building / demo permit and work is progressing)

Is this property listed for sale? _____

If someone were to inquire regarding the purchase of this property, to whom should they be referred? _____

Is this property currently in foreclosure? If so, when will the redemption period end? _____

If this property is subject to foreclosure, please provide the name and address of the bank or other mortgage holder. _____

Are there any dangerous or unusual conditions that the City or the Sheriff should be aware of, should they need to enter the property to inspect or secure? If so, please explain in detail:

Is there any additional information regarding this dwelling that you want the City to be aware of? _____

Have you received a copy of the City of Mount Clemens Abandoned / Vacant Structure Ordinance? _____

Signature of owner or legal representative: _____

Signed by: (Printed name of above person): _____

Date Signed: _____

Please note that furnishing false information could constitute a violation of section 20.001D of the Mount Clemens Code of Ordinance. Violation of this ordinance is a misdemeanor and punishable by up to 93 days in jail and / or a \$500.00 fine.

Return to:

**City of Mount Clemens
Community Development Department
One Crocker Blvd.
Mount Clemens, MI 48043
Fax: 586-469-7695**