



Application for Certificate of Registration Vacant Property or Structure

Buildings, Safety Engineering and Environmental Department
Room 412 Coleman A. Young Municipal Center
2 Woodward Avenue, Detroit MI 48228

Property Address: Street _____ State ____ City _____ Zip _____
Square Footage _____ Year Constructed _____ Usage _____
Number of Stories _____

Property Owner Information

Name of Owner: _____ Phone # _____
Address of Owner: _____
Street City State Zip
Email Address _____

*If all owners reside out side of the state of Michigan you must provide the local responsible person information requested below
*All owners must be listed on this application, please attach additional applications as needed

Local Responsible Person Information

Local responsible person name: _____
Phone number _____ Address _____
Street City State Zip
Email Address _____

Legal or Equitable Interest Party Information e.g., Bank, Lien Holder, Financial Institution

*All Legal and/or equitable interest parties must be listed on this application, please attach additional applications as needed.

Name: _____ Phone # _____
Address: _____
Street City State Zip

Plan and Timeline

My property is in: good condition fair condition poor condition

I plan to: demolish on or before _____ offer for rent on or before _____ offer sell on or before _____

maintain the property vacant and secure in compliance with Section 9-1-50 and 9-1-113 of the Detroit Property Maintenance Code.

I HEREBY CERTIFY THAT THE ABOVE INFORMATION IS CORRECT AND THAT I AM THE LEGAL OWNER OR AN AUTHORIZED REPERESENTATIVE OF THE OWNER.

SIGNATURE OF OWNER OR AUTHORIZED REPRESENTATIVE _____ DATE _____

SUBSCRIBE AND SWORN BEFORE ME, THIS _____ DAY OF _____, 20_____

_____ MY COMMISSION EXPIRES ON _____

NOTARY PUBLIC, _____ COUNTY, MICHIGAN