



# Vacant Building Registration Form

Registration Date: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Common Address of Structure: \_\_\_\_\_

Parcel Tax ID# \_\_\_\_\_

Owner's Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

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

Other Responsible Party or Local Representative of the Owner: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Address: \_\_\_\_\_

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

Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**Statement of Plan (plan for rehabilitation, maintenance or demolition of structure)**

Length of time the owner expects the vacancy to continue: \_\_\_\_\_

Attach a plan of proposed rehabilitation or improvements to be made to the structure so as to make the structure suitable for its intended use.

**All required permits must be obtained before any work may be started.**

Describe what will be done to secure the structure so that it will not become open to the general public:

\_\_\_\_\_  
\_\_\_\_\_

**Please accept this application also as my written permission for representatives of the City of Albany to enter and inspect the above real property as the City of Albany may deem necessary. I understand and agree to comply with the requirements in sections 16-13.1 through 16-14.4 of the City of Albany Code of Ordinances.**

Owner Signature \_\_\_\_\_ Date \_\_\_\_\_

**(OFFICE USE ONLY)**

Is property located in the Historic District? Yes \_\_\_ No \_\_\_ If yes, owner must apply for Certificate of Appropriateness thru Historic Preservation Committee.

Is property located in the Riverfront District? Yes \_\_\_ No \_\_\_

P & D Services, Application Complete: \_\_\_\_\_ Date \_\_\_\_\_

Code Enforcement Approval: \_\_\_\_\_ Date \_\_\_\_\_

Downtown Manager Approval: \_\_\_\_\_ Date \_\_\_\_\_