



# CITY OF IRONTON VACANT PROPERTY / BUILDING REGISTRATION FORM

All vacant properties/buildings must register with the City of Ironton Public Service Department in accordance with the Vacant Building Registration Ordinance 18-55. Please complete this form for each vacant property address. Temporary exemptions for disaster-affected properties, structures actively under construction, properties listed with a licensed realtor in the State of Ohio, or a vacant property that is being marketed for rent may be approved upon written request.

## **Section 1: Address of Vacant Property/Building (Required).**

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

## **Section 2: Property Owner Information (Required)**

(No P.O. Boxes are permitted; must provide physical address.)

### **If individual Owner or Designated Agent, please complete the following:**

Property Owner's Name: \_\_\_\_\_

Property Owner's Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Telephone No: \_\_\_\_\_ Cell No: \_\_\_\_\_

Designated Agent or Contact Person: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

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

Telephone No: \_\_\_\_\_ Cell No: \_\_\_\_\_

### **If Partnership, Corporation, Trust or Other, please complete the following:**

**(Please use the supplemental form to list each additional partner, officer, or trustee.)**

Tax ID Number of Partnership or Corporation: \_\_\_\_\_

Name of Partnership or Corporation: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Title: \_\_\_\_\_

Designated Agent or Contact Person: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone No. \_\_\_\_\_ Cell No. \_\_\_\_\_

E-Mail \_\_\_\_\_

## **Section III: Designated Agent / Property Manager (If owner is outside of local area)**

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

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

Phone No: \_\_\_\_\_ Cell No. \_\_\_\_\_

E-Mail \_\_\_\_\_



**Section IV: Vacant Building Plan (Required)**

I hereby submit a plan of (Please Check) Demolition \_\_\_\_\_ Secure Vacancy \_\_\_\_\_ Rehab \_\_\_\_\_

**Section V: Proof of Insurance (Required)**

If submitting a plan of demolition, please provide proof of holding in escrow with the City of Ironton the amount of ten thousand dollars (\$10,000) for a residential building and seventy-five (\$75,000) for a commercial building. Escrow funds will be released upon completion of the work or transfer of ownership, provided that all fees have been paid in full. New owners must sign a form accepting responsibility for completing the demolition. Use additional paper to outline further details pertaining to your plan.

**Escrow for Demolition:** Yes \_\_\_\_\_ No \_\_\_\_\_

**Section VI: Fees (Required)**

Please make checks payable to City of Ironton. The vacant property registration payment included with this form pertains to the current year of vacancy and is (Please Circle) for year \_\_\_\_\_:

Current Year	1st year	2nd year	3rd year	4th year	5th year
Residential	\$200	\$400	\$800	\$1,600	\$3,200
Commercial	\$400	\$800	\$1,600	\$3,200	\$6,400

I, \_\_\_\_\_, hereby request to register the vacant property/building listed above and acknowledge that the information above is complete and accurate. I have read and understand Section 1484 of the Ironton Codified Ordinances for owning a vacant property in the City of Ironton and agree to notify any future owner of this vacant building registration.

\_\_\_\_\_/\_\_\_\_\_  
**Applicant's Signature** **Date**

Subscribed and duly sworn before me according to the law, by the above named applicant this day \_\_\_\_\_ in the City of \_\_\_\_\_.

Notary Signature: \_\_\_\_\_