

CITY OF BERKLEY
Building Department
3338 Coolidge Highway
Berkley, Michigan 48072
(248) 658-3320

VACANT BUILDING REGISTRATION FORM

Application is hereby made for registering the vacant residential or commercial building and all accessory buildings or structures located on:

Property Address _____ Sidwell _____

Number of Units: Residential _____ Commercial _____ Zoning _____

Reason for the Vacancy: _____

What do you intend to do with the Property? _____

Potential Date that Building will be Reoccupied or Demolished: _____

Property Owner

Name _____

Address _____

City _____ State _____ Zip _____

Day Phone _____ Evening Phone _____

Drivers License # _____ Date of Birth _____

Agent Information (if applicable)

Name _____

Address _____

City _____ State _____ Zip _____

Day Phone _____ Evening Phone _____

AFFIDAVIT OF OWNER

I hereby certify that the above information and answers are correct and true; that I am the legal owner of the premises at the above location. I have been provided with a copy of Berkley City Code, Chapter 26 Buildings and Building Regulations, Article XI Vacant and Neglected Properties and I am familiar with the provisions set forth in such sections.

Further, I hereby agree that the Building Official shall be permitted to inspect the interior and exterior of the above described property.

Signature of _____ Owner _____ Agent

Please PRINT Name Signed

Date

Office Use Only (Account Number 101-001-476-000)

Fee _____ Date Received _____ Receipt # _____