

**City of Hazel Park
111 E. Nine Mile
Hazel Park, MI 48030**

Abandoned/Vacant Structure Registration Form

OWNER INFORMATION

Abandoned/Vacant Structure Address: _____

Owner Name(s): _____

Owner Address(es): _____

Telephone: _____ **Email:** _____

**** Please attach State-issued ID for each owner ****

Reason for Vacancy: _____

Name/Contact Information for the Mortgage Company [If under foreclosure or deed in lieu of foreclosure has been provided]: _____

Estimated time of vacancy: _____

Restoration/Timeline Schedule: _____

AGENT/REPRESENTATIVE INFORMATION (If Applicable)

Individuals authorized by the Owner to handle the affairs of the property, including, but not limited to real estate agents, rental managers, property maintenance personnel

Name: _____

Address: _____

Telephone: _____ **Email:** _____

Building Approval: Yes No

Treasurer Approval: Yes No

Fee: _____ **Receipt #:** _____ **Date:** _____ **Initials:** _____

