



## VACANT PROPERTY REGISTRATION FORM

Pursuant to City of Dearborn Ordinance 08-1148, vacant property must be registered. The purpose of this ordinance is to help protect the health, safety and welfare of the citizens by preventing blight, protecting property values and neighborhood integrity, avoiding the creation and maintenance of nuisances and ensuring safe and sanitary maintenance of dwellings, commercial and industrial buildings.

- Vacant property is defined as a lot, building or structure that is not legally or currently occupied.
- Registration fee is \$25 per property, payable to "City of Dearborn."

### Vacant Commercial Property

- Commercial/industrial structures must be registered within 90 days of vacancy.
- Inspections are required for all vacant commercial/industrial on a yearly basis.
- Inspection fees are based on square footage (\$200 up to 5,000 square feet).

### Vacant Residential Property

- Residential property must be registered within 180 days of vacancy.
- Vacant residential property intended for sale or for rent must be inspected on a yearly basis.
- Inspection fee is \$150.

First Notification

Revised Information

<b>PROPERTY ADDRESS</b>			
_____ Dearborn, MI <input type="checkbox"/> 48120 <input type="checkbox"/> 48124 <input type="checkbox"/> 48126 <input type="checkbox"/> 48128			
<b>PROPERTY TYPE</b>			
<input type="checkbox"/> One or Two Family Residential <input type="checkbox"/> Multi-family Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial			
<b>PROPERTY OWNER</b>			
NAME			
CONTACT NAME (if business)			
ADDRESS			
CITY		STATE	ZIP
PHONE NUMBER		E-MAIL ADDRESS	
<b>PROPERTY MANAGER</b>			
NAME			
CONTACT NAME (if business)			
ADDRESS			
CITY		STATE	ZIP
PHONE NUMBER		E-MAIL ADDRESS	
<b>EMERGENCY CONTACT</b>			
<input type="checkbox"/> Property Owner <input type="checkbox"/> Property Manager <input type="checkbox"/> Other -- Name _____ Phone Number _____			
<b>AUTHORIZATION</b>			
By signing and submitting this document, I am authorizing the City of Dearborn to utilize this information and certifying that I have the legal authority to do so.			
SIGNATURE			
PRINT NAME			
DRIVER'S LICENSE #			DATE