City of Southfield
Department of Building & Safety Engineering

26000 Evergreen Rd
P.O. Box 2055
Southfield, M 48037-2055

NEW OWNER VACANT REGISTRATION AFFIDAVIT

Registration # _____ **Date:** _____

Registration Fee: $20.00 Application Fee: $40.00

Property Address: _____Sidwell Parcel: _____

Type of Building_____

Property Owner: _____

Address _____
Number Street City State Zip

Phone _____ Email _____

Fax _____ Cell Phone _____

Date of Birth _____

Pursuant to Section 8.605, Chapter 104 Ordinance 1569:

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 Chapter 104, Sections 8.601 through 8.610 and I am familiar with the provisions set forth in such sections.

Further, I hereby agree that the Director or his designee shall be permitted to inspect the interior and exterior of the above described property a minimum of two (2) times per year upon reasonable notice and at reasonable times while the property remains vacant.

State of Michigan)_____ _____
County of Oakland) Owner Signature Print Name

Subscribed and sworn to before me this _____ day of _____ A.D. 20_____

_____
Notary Public County My Commission Expires

July 2016