License # 2016-_____

City of Rockford
6031 Main Street
Rockford, MN 55373
Phone: (763) 477-6565
Fax: (763) 477-4393

VACANT BUILDING REGISTRATION APPLICATION

For the year of 2016

Annual Fee $100.00

Vacant Building Address: _____

Description of Building/Premises: _____

Parcel Identification (PID) #: _____

Date Building Vacated: _____

Time Frame the Building will be Vacant: _____

Plan or timetable for returning the building to appropriate occupancy: _____

_____

Owner(s) Name: _____

Address: _____

City, State, Zip: _____

Phone: (_____) _____

Lien Holder's Name:_____

Address: _____

City, State, Zip: _____

Phone: (_____) _____

(attach additional contact(s) if needed)

The owner shall notify the city in writing of any changes in the information supplies as part of the vacant building registration within seven (7) days of such change.

Vacant Buildings are regulated by Ordinance 613. It is the owner responsibility to comply with the regulations regarding Vacant Building Registration.

Signature of Owner: _____

To be completed by staff:			
Date Application Received	**Fee Paid**	**Date Occupied**	**New Contact**