



# CITY OF MIAMI

## Vacant, Blighted, Unsecured or Abandoned Structure Registration Form

PROPERTY ADDRESS: \_\_\_\_\_

FOLIO NO.: \_\_\_\_\_

OWNER'S NAME \*: \_\_\_\_\_

OWNER'S MAILING ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ Zip: \_\_\_\_\_

OWNER'S BUSINESS PHONE: \_\_\_\_\_

OWNER'S EVENING PHONE: \_\_\_\_\_

OWNER'S 24-EMERGENCY PHONE: \_\_\_\_\_

OWNER'S E-MAIL ADDRESS: \_\_\_\_\_

AGENT OR RESPONSIBLE PARTY: \_\_\_\_\_

BANK / FINANCIAL INSTITUTION CONTACT INFO.: \_\_\_\_\_

TYPE OF STRUCTURE: (Please check one)     Residential     Commercial

I, \_\_\_\_\_, authorize the City of Miami and its agents to enforce trespassing violations or other unauthorized/unlawful activity on the premises. I certify that I am authorized to enter into such an agreement with the City of Miami.

\*\*\*\*\*

Subscribed and sworn to before me in the county of _____, State of Florida, this _____ day of _____, 20____.	_____
	(Notary's official signature)
NOTARY SEAL	_____
	(Commission expiration date)

\* If property is owned by a Corporation, Limited Partnership or LLC, please complete the following:

Principal Officer or Managing Member: \_\_\_\_\_

24-Hour Contact Information: \_\_\_\_\_

\*\*\*\*\*

**THIS SECTION FOR USE BY DEPARTMENT OF NET ADMINISTRATION ONLY**

Date Application Submitted: \_\_\_\_\_ Date Entered in Records: \_\_\_\_\_ Processed by: \_\_\_\_\_

NOTES: \_\_\_\_\_

\_\_\_\_\_