



**CITY OF LINCOLN PARK**  
**BUILDING DEPARTMENT**  
**VACANT BUILDING REGISTRATION FORM**  
**1355 SOUTHFIELD RD, LINCOLN PARK, MI 48146**  
 PH: (313) 386-1800 FAX: 313-386-0490

FOR OFFICE USE ONLY	
REG #:	_____
DATE ISSUED:	_____
EXPIRATION:	_____



**Fee: \$150.00 every 180 days**

**ADDRESS OF PROPERTY:** \_\_\_\_\_

**Owner(s) of Property:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Responsible Party of Property:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Email: \_\_\_\_\_

List additional owner's or officer's information on a separate sheet and attach. .  
 Responsible party must be a Michigan resident and live within one hundred (100) miles of Lincoln Park.  
 All correspondence is sent to the responsible party.  
**A COPY OF THE MANAGEMENT AGREEMENT BETWEEN THE OWNER AND RESPONSIBLE PARTY  
 MUST BE INCLUDED WITH THIS APPLICATION.**

The correct registration fee must accompany this application. Upon inspection and approval by the Building Department, a license will be issued. It is a violation of the Ordinance not to notify this Department of a change in ownership or contact information. The Owner(s) and Responsible Party remain liable under this agreement until such change in ownership is notified. Change in ownership does not negate liability for violations that occurred during ownership of this property.

*By signing this application I certify that I have read and understand the above and below conditions and state that all information is true to the best of my knowledge.*

*I PERSONALLY GUARANTEE TO PAY ALL FEES OR FINES THAT MAY ACCRUE TO THIS. I AGREE THAT ALL DISPUTES ARISING OUT OF THIS AGREEMENT ARE IN THE EXCLUSIVE JURISDICTION OF THE COURTS OF MICHIGAN. THIS AGREEMENT IS GOVERNED BY MICHIGAN LAW.*

**Must be signed by Legal Owner or Responsible Party:**

\_\_\_\_\_ Drivers License # \_\_\_\_\_ State \_\_\_\_\_

Print Personal Name: no LLC, Corporation, or Other Legal Entity

\_\_\_\_\_  
 (Signature)

\_\_\_\_\_  
 Date