



ABANDONED PROPERTY REPORTING FORM

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

Tax Block/Lot: \_\_\_\_\_

Property Type:

\_\_\_\_\_ Single-Family Detached \_\_\_\_\_ Multi-Family \_\_\_\_\_ Industrial
\_\_\_\_\_ Single-Family Twin \_\_\_\_\_ Commercial \_\_\_\_\_ Other
\_\_\_\_\_ Single-Family Row \_\_\_\_\_ Residential/Non-Residential Mix

Description: \_\_\_\_\_
\_\_\_\_\_

IF KNOWN, how long has property been vacant? \_\_\_\_\_ months
\_\_\_\_\_ years

Check ALL that apply:

- \_\_\_\_\_ Property is not well secured
\_\_\_\_\_ Property is not habitable without major repair
\_\_\_\_\_ Property has accumulations of trash or debris
\_\_\_\_\_ Property is used for criminal or drug activity
\_\_\_\_\_ Property is a fire hazard

Comments/Observations: \_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_

Submitted By: \_\_\_\_\_
Name: \_\_\_\_\_
Organization/Agency \_\_\_\_\_
Phone: \_\_\_\_\_
Email: \_\_\_\_\_

OFFICIAL USE ONLY

Date Received \_\_\_\_\_
Inspection Date \_\_\_\_\_
Findings \_\_\_\_\_
\_\_\_\_\_

Date of Notice to Requesting Agency of Determination: \_\_\_\_\_
Publication Date: \_\_\_\_\_
Certified Notice or Posting Date: \_\_\_\_\_
Hearing Requested: \_\_\_\_\_ Yes \_\_\_\_\_ No
Redetermination Hearing Date: \_\_\_\_\_
Redetermination Disposition: \_\_\_\_\_
Disposition Mailing Date: \_\_\_\_\_
Appeal: \_\_\_\_\_ Yes \_\_\_\_\_ No
Agency Property Assigned/Transferred: \_\_\_\_\_
Date: \_\_\_\_\_