



Town of Cicero

Building Department
4949 W. Cermak Road
Cicero, IL 60804
(708)656-3600

Vacant Building Registration Form

Dear Property Owner,

Pursuant to Article X of Chapter 22 of the Code Ordinances of the Town of Cicero, Illinois (the "Town Code") within fifteen (15) calendar days after the date of the Building Commissioner's (or his designee's) notice of determination, the occurrence of the facts that would cause a reasonable person to believe that a building is a "Vacant Building" as defined in Section 22-613 of the Town Code, or a denial of an appeal, whichever is applicable, the owner of a vacant building shall register the building with the Cicero Building Department.

Please complete this form and submit this form and a certified check or money order in the amount of Two Hundred Dollars (\$200.00) for the vacant building registration fee. Please make checks payable to the Town of Cicero. Please note that you are required to file an amended registration form within fifteen (15) calendar days of any change to the information provided herein.

FOR THE TIME THAT THE BUILDING REMAINS VACANT, THE OWNER OF THE BUILDING MUST RENEW THE VACANT BUILDING REGISTRATION EACH YEAR ON THE ANNIVERSARY DATE OF THE FIRST FILING AND PAY THE TWO HUNDRED DOLLAR (\$200.00) REGISTRATION FEE.

This registration is not a certificate of the Town Code and does not protect the registered property from demolition. By registering the property, the owner certifies that the building is vacant, secure, sufficiently posted and the required insurance is current.

Section I – Building Information

Correct Address of the Billing: _____

Permanent Real Estate Index Number(s) of the building: _____

Primary use of the Building? _____ Residential or _____ Nonresidential. If Nonresidential, please explain most recent use: _____

Number of units within the building: _____

Case Name and Case Number of any Litigation Pending Concerning or Affecting the Building (Including Bankruptcy any Cases): _____

Section II – Ownership Information

A. Please list the name, address, and telephone number of the owner. If there are multiple owners please attach additional sheet(s) as needed.

Owners Name: _____

Owners Address: _____

Owners Phone Number: _____

Owners Email Address: _____

Names of all persons and entities with any legal interest in the building or the premises (including mortgage companies and if the building or premises in held in a land trust, the beneficiary(ies) of the trust): _____

Addresses of all persons with any legal interest in the building or the premises: _____

Telephone numbers of all persons with any legal interests in the building or premises: _____

B. Please list an agent designated to receive notices and senior service of process. Such person must be twenty-one (21) years of age or older and maintain a permanent address (this is not a post office box) in Cook County, Illinois. An owner who satisfies the foregoing criteria may designate himself or herself as the agent.

Agents Name: _____

Agents Address: _____

Agents Phone Number: _____

C. The Town Code requires that the property be insured. Please provide the following information for the insurance company and attach a copy of the insurance policy.

Insurance Company's name: _____

Insurance Company's address: _____

Insurance Company's telephone number: _____

Section III – Condition/States of building

- | | | |
|---|-----|----|
| a. Is building enclosed and secured? | YES | NO |
| b. Has a sign been posted on the building listing the Owners name, address, and phone number? | YES | NO |
| c. Is this property in fast track demolition? | YES | NO |
| d. Is there refuse service for this property? | YES | NO |

Section VI – Certification

I hereby certify that I have examined this vacant building registration form and to the best of my knowledge and belief, it is true, accurate and complete. I acknowledge that I am required to allow a code compliance inspection of the interior of the building and pay the fee associated therewith. I am also aware that I am required to obtain and maintain insurance and failure to obtain and maintain adequate insurance and/or submitting incomplete or inaccurate information on this form shall be deemed a violation of Article X Chapter 22 of the Town Code and will subject owners to fines of One Hundred Dollars (\$100.00) to Seven Hundred and fifty Dollars (\$750.00) per day, per violation.

BY AFFIXING MY SIGNATURE, I AM ADVISED THAT THE TOWN OF CICERO WILL NOT ISSUE REAL ESTATE TRANSFER STAMPS PRIOR TO THE CICERO BUILDING DEPARTMENT HAVING CONDUCTED AN INTERIOR INSPECTION OF THE BUILDING TO ENSURE COMPLIANCE WITH APPLICABLE ORDINANCES, CODES, STATUTES, LAWS, ORDERS, RULES AND REGULATIONS. I AM AWARE THAT THIS FORM DOES NOT DISCLOSE ALL OF MY RESPONSIBILITIES WITH REGARD TO THE BUILDING AND THAT I AM REQUIRED TO COMPLY WITH ALL APPLICABLE ORDINANCES, CODES, STATUETES, LAWS, RULES AND REGULATIONS.

Signature of Owner

Date

Printed Name