

CITY OF HILLSBORO

VACANT STRUCTURE REGISTRATION CERTIFICATE

___ Initial 6 Month Registration ___ Renewal ___ month Registration

24-hour Emergency Contact #:				Date:	
VACANT STRUCTURE ADDRESS					
Vacant Structure Address:					
Type of Structure:	Residential 1 or 2 units	Residential 3+ units	Commercial, Manufacturing, Storage or any Nonresidential		
Parcel ID # (if known)					
Number of units within the building					
PROPERTY OWNER(S) INFORMATION					
Owner #1 Information					
Name or Business:					
Mailing Address:					
City:		State:		Zip Code:	
Home li:		Mobile			
Fax		Email:			
Owner #2 Information					
Name or Business:					
Mailing Address:					
City:		State:		Zip Code:	
Home W.		Mobile			
Fax if:		Email:			
Name of Person(s) Authorized to be present in the structure per Section 6-4-4:					
Name:		Phone #:			
Name:		Phone #:			
Name:		Phone #:			
Name:		Phone #:			
Name of Insurance Company (Required by Section 6-4-8)					
Name or Business:					
Mailing Address:					
City:		State:		Zip Code:	
Home if:		Mobile			
Fax #:		Email:			
Proof of Insurance Attached (Required Liability Insurance)					
Type of Structure:				Minimum Liability Insurance Amount	
Residential properties of one or two units					
Residential Properties of three or more units					
Commercial, manufacturing, storage or any non-residential property					
Comments:					

STATEMENT OF INTENT SECTION 6-4-5

Expected date of vacancy (Including the date of initial vacancy)	
Plan including timeline for regular maintenance during vacancy	
Plan and timeline for Lawful occupancy rehabilitation, removal, or demolition of the structure	
Measures/plans (including timeline) to ensure structure will be secure	
Timeline of structure to be free of nuisance conditions.	

Please check if you are requesting a Waiver Per Section 6-4-9. Attach a copy of Signed Waiver.

City Utility Bills: Section 38-2-3 of the City's Codified Ordinances states that the occupant shall be primarily responsible for payment for utility service (water, sewer) at such premises. I certify that I am aware of the City's Building Safety codes and Zoning (occupancy) codes and the legal ramifications for knowingly violating said codes. I acknowledge that I am responsible for delinquent utility bills due to the City of Hillsboro for this property.

 Owner's signature Date Owner's Printed Name Date

PAYMENT OF ALL FEES DUE AT TIME OF REGISTRATION

Vacant Structure Fee \$25.00 for six (6) months. At the City's sole discretion, renewal may be approved upon demonstrated need for a maximum of 3 consecutive 6-month periods for an aggregated maximum of 24 months total vacancy registration. If approved each 3 periods will be \$25.00.

Please return this form with payment to:
 City of Hillsboro
 c/o: Vacant Property Registration
 447 S. Main St.
 Hillsboro, IL 62049