

Township Supervisor
Brenda L. Stumbo
Township Clerk
Heather Jarrell Roe
Township Treasurer
Stan Eldridge



**YPSILANTI
TOWNSHIP**
— ORDINANCE DEPARTMENT —

Trustees
John Newman II
Gloria Peterson
Debbie Swanson
Ryan Hunter

VACANT PROPERTY REGISTRATION APPLICATION

Vacant Property Address: _____

Single Family: _____ Multi-Family: _____ Number of Units: _____

Commercial/Industrial: _____ Number of Buildings: _____ Number of Units: _____

LockBox: _____ Code: _____ (to be used for entry to inspect)

Owner Information

Owner's Name: _____ MI ID#: _____

Corporation Name: _____

Corporation Resident Agent: _____

Owner's Physical Address (if applicable): _____

Owner's Mailing Address: _____

Phone: _____ Cell Phone: _____

Email: _____

Property Manager/Emergency Contact

_____ **Check Here if Same as Above**

Company Name: _____

Agent: _____

Agent Address: _____

Agent Phone: _____ Cell Phone: _____

Agent's Email: _____

COMPLETE APPLICATION ON REVERSE SIDE

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The undersigned hereby makes application to register the described property and obtain certification pursuant to the Ypsilanti Township Vacant Property Ordinance, Chapter 48. I understand that such certification may be revoked in case of violation of such law and the enforcing officials shall be permitted to inspect the dwelling and property listed herein. I understand that property subject to this Article that is left open and/or accessible shall be subject to entry by enforcing officials in order to ensure that the property has not become an attractive nuisance and will be secured at the property owner's expense. I hereby certify that this application contains a true and complete listing of the information requested. I agree to notify the Charter Township of Ypsilanti of any changes to the information listed in this application within 10 days of the change.

Signature of Owner: _____ Date: _____

OWNER/AGENT AFFIDAVIT

THE UNDERSIGNED is the owner and/or owner's agent responsible for the vacant property located at: _____

I have investigated the structural integrity and utilities at the above described property and do hereby state:

- a. The water service to the property is: Operational Properly Disconnected
- b. The sewer system to the property is: Operational Properly Disconnected
- c. The gas service to the property is: Operational Properly Disconnected
- d. The electric service to the property is: Operational Properly Disconnected
- e. Does the structure have a basement sump pump system: Yes No
 - 1. If so, is the pump operational: Yes No

I certify that I have read the foregoing affidavit and that the contents herein are true to the best of my knowledge and belief:

Signature of Affiant

Printed Name

Subscribed and sworn before me on the _____ day of _____, 20__

_____, Notary Public

County, Michigan
Acting in _____ County, Michigan
My commission expires: _____