



VACANT PROPERTY/BUILDING REGISTRATION FORM

All vacant properties/buildings must register with the City of Coshocton Property Code Department in accordance with the Vacant Building Registration Ordinance – Section 1355.00 of the Coshocton Codified Ordinances. Please complete this form for each vacant property address. Temporary exemptions for disaster-affected properties, structures actively under construction, properties listed with a licensed realtor in the State of Ohio, or a vacant property that is being marketed for rent may be approved upon **written request**.

Section I: Address/es of Vacant Property/Building (Required)

Street Address/es: _____

Section II: Property Owner Information (Required)

(No P.O. Boxes are permitted; must provide a building address.)

If Individual Owner or Designated Agent, please complete the following:

Property Owner's Name: _____
Owner's Address: _____
City: _____ State: _____ Zip Code: _____
Designated Agent or Contact Person: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone Number: _____ Fax Number: _____
E-Mail Address: _____

If Partnership, Corporation, Trust or Other, please complete the following:

(Please use the supplemental form to list each additional partner, officer, or trustee.)

Tax ID Number of Partnership or Corporation: _____
Name of Partnership or Corporation: _____

760 Chestnut Street Coshocton, OH 43812

740-622-1465

www.cityofcoshocton.com

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Contact Person: _____ Title: _____
Title: _____
Designated Agent or Contact Person: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone Number: _____ Fax Number: _____
E-Mail Address: _____

Section III: Local Agent / Property Manager (If owner is outside of local area)

Please list Name, Address, Phone number and any additional information necessary to contact for interior and exterior inspections.

Name: _____
Address: _____
Phone: _____
Additional Remarks: _____

Section IV: Vacant Building Plan (Required)

I hereby submit a plan of (*Please Circle*): Demolition | Secure Vacancy | Rehabilitation:

Section V: Demolition Permit Fees (Required)

1311.04 PERMIT FEES.

The fee for demolition permits shall be determined by the City Council. Rates are as follows:

Residential – 1 and 2 family - \$50.00 plus \$.10 per sq. ft. over 1500 sq.ft.

All Other - \$1000.00 plus \$.20 per sq. ft.

[Ord. 53-15, Passed 12-21-15.]

Section VI: Fees (Required)

Please make checks payable to **City of Coshocton**. The vacant property registration payment

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included with this form pertains to the current year of vacancy and is (*Please Circle*):

Residential: \$200-1st yr. | \$400-2nd yr. | \$800-3rd yr. | \$1,600-4th yr. | \$3,200-5th yr. or later

Commercial: \$800-1st yr. | \$1600-2nd yr. | \$3200-3rd yr. | \$6400-4th yr. or later. I,

_____, hereby request to register the vacant property/building listed above and acknowledge that the information above is complete and accurate. I have read and understand Ordinance 1355.00 for owning a vacant property in the City of Coshocton and agree to comply with these requirements. In accordance with this Ordinance, I agree to notify any future owner of this vacant building registration.

Applicant's Signature

Date

Subscribed and duly sworn before me according to the law, by the above-named applicant this day

_____ in the City of _____.

Notary Signature: _____