

# CASTLE SHANNON BOROUGH

3310 McRoberts Road, Castle Shannon, PA 15234 (412) 885-9200  
Castle Shannon Department of Code Enforcement

## ORDINANCE #910 VACANT AND ABANDONED PROPERTY REGISTRATION APPLICATION FORM

### PROPERTY / LAND USE

**NOTE: PLEASE PRINT OR TYPE THIS APPLICATION**

#### **APPLICANT:**

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address & Zip Code: \_\_\_\_\_

Relationship to Owner of Record: \_\_\_\_\_

Email: \_\_\_\_\_ Fax: \_\_\_\_\_ EIN#: \_\_\_\_\_

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#### **OWNER OF RECORD OF SUBJECT PROPERTY:**

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address & Zip Code: \_\_\_\_\_

Email: \_\_\_\_\_ EIN# \_\_\_\_\_

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#### **PROPERTY INFORMATION:**

Present Zoning: \_\_\_\_\_ Lot & Block #: \_\_\_\_\_

Location: \_\_\_\_\_

Nature of Structures on Property: \_\_\_\_\_

Date Property Became Vacant or Abandoned: \_\_\_\_\_

Person Responsible for Property Maintenance:

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Phone (24 hour availability): \_\_\_\_\_ Email: \_\_\_\_\_

Relationship to owner: \_\_\_\_\_

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#### **NOTES:**

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**CERTIFICATION OF AUTHORIZATION BY OWNER:**

I certify that I am either the owner, mortgagee, lender, legal entity, or person authorized by the owner to submit this application.

I also certify that I am aware of applicable Castle Shannon Borough Ordinances and that they are available for review in the office of the Castle Shannon Borough Department of Code Enforcement

\_\_\_\_\_ **PLEASE PRINT**

Name of Owner or Agent

\_\_\_\_\_ **PHOTO ID REQUIRED**

Signature of Owner or Agent  
Application

\_\_\_\_\_ Date of

Fee Paid: \_\_\_\_\_

Date Paid: \_\_\_\_\_

Application Approved By: \_\_\_\_\_ Date: \_\_\_\_\_