



CITY OF ALBANY  
DIVISION OF BUILDINGS & REGULATORY COMPLIANCE  
ROOM 303 - CITY HALL  
24 EAGLE STREET  
ALBANY, NEW YORK 12207  
PHONE: (518) 434-5165  
FAX: (518) 434-6015

**Official Use Only**

Reg. No. \_\_\_\_\_  
Date \_\_\_\_\_  
Rec'd By: \_\_\_\_\_  
Fee \_\_\_\_\_

## VACANT BUILDING REGISTRATION FORM

*(Please complete and return ONE form per property within twenty (20) days – Must be typed or legibly printed.)*

### TYPE OF APPLICATION

- Original Registration  
 Update of Application Previously Submitted (must be within 30 days of change)  
Date of Application Change: \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Renewal Registration  
Date of Original Registration: \_\_\_\_/\_\_\_\_/\_\_\_\_

### PROPERTY DESCRIPTION

Building Address (Number, Street, City, State, Zip) \_\_\_\_\_

Real Estate Index No. \_\_\_\_\_

Date of Vacancy \_\_\_\_\_ Estimated length of time building will be vacant (months/years) \_\_\_\_\_

Sq. Footage of Building \_\_\_\_\_ No. of Stories Above Ground Level \_\_\_\_ Below \_\_\_\_

Age of Building \_\_\_\_\_ Most Recent Use \_\_\_\_\_

No. of Dwelling/Office Units \_\_\_\_\_

Sprinkler System  Yes  No [Operational  Yes  No / Current Inspection  Yes  No]

Stand Pipe System  Yes  No [Operational  Yes  No / Current Inspection  Yes  No]

Fire Detection System  Yes  No [Operational  Yes  No / Current Inspection  Yes  No]

Elevator  Yes  No [Operational  Yes  No / Current Inspection  Yes  No]

Is the building in an historic district regulated by the Zoning Ordinance?\*  Yes  No

\*If "yes," please attach an explanation of what measures will be taken to ensure that the building does not suffer structural damage due to neglect.

Status:  Abandoned  Distressed  Secure  Open and Accessible

Utilities: Electricity  On  Off Water  On  Off Gas  On  Off

Description of hazardous materials, uses or conditions that currently exist or previously existed (list all that apply): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**BOND INFORMATION** (Please submit a copy of Bond with application.)

\_\_\_\_\_  
Name of Bonding Company

Amount of Bond (Amount of Bond should match cost of rehabilitation/renovation/demolition.)  
\$ \_\_\_\_\_

**OWNERSHIP INFORMATION** (If more than one owner, attach additional sheets)

\_\_\_\_\_  
Owner Name

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Social Security No. \_\_\_\_\_

Driver License No. \_\_\_\_\_

- Is this Owner a
- Corporation (include Certificate of Corporation)
  - Limited Partnership (include Certificate of Limited Partnership)
  - Limited Liability Company (include Articles of Organization and list Names and Addresses of all members on separate and attached sheet)
  - Trust (EIN: \_\_\_\_\_)
  - Estate (EIN: \_\_\_\_\_)

Owner Tax ID Number (if applicable) \_\_\_\_\_

\_\_\_\_\_  
Mailing Address (Number, Street, City, State, Zip)

( ) \_\_\_\_\_  
Telephone Number

( ) \_\_\_\_\_  
Alternate Telephone Number

\_\_\_\_\_  
Email Address

Type of Ownership

- Titleholder  Land Contract Seller  Land Contract Purchaser  Other – Specify \_\_\_\_\_

**LIEN HOLDER INFORMATION** (If more than one lien holder, attach additional sheets)

\_\_\_\_\_  
Name of Lien Holder

\_\_\_\_\_  
Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

\_\_\_\_\_  
Contact Name

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

Type:  Lien Holder  Other Financial Interest – Specify \_\_\_\_\_



## SIGNATURES

*The undersigned attests to the above information as accurate. Any falsification may result in the denial or revocation of the certificate of registration for a vacant building.*

Owner 1 Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Owner 2 Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Officer of Corporation, Limited Partnership, Limited Liability Company or  
Limited Liability Partnership \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Title & Company \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Agent Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Title & Company \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

## DIRECTIONS FOR COMPLETION OF VACANT BUILDING REGISTRATION FORM:

1. **OWNER** -- Those shown to be the owner or owners on the records of the City of Albany Department of Assessment and Taxation, those identified as the owner or owners on a vacant building registration form, a mortgagee in possession, a mortgagor in possession, assignee of rents, receiver, executor, trustee, lessee, other person, firm or corporation in control of the premises. Any such person shall have a joint and several obligation for compliance with the provisions of this article.
2. **AGENT** -- If the owner does not reside in Albany County or any adjoining county, the name and address of any third party (living within Albany County or any adjoining county) with whom the owner has entered into a contract or agreement for property management.
3. **CONTACT PERSON PHONE** – A responsible party that can be reached at all time during business and non-business hours. Please include both telephone numbers.
4. **LIEN HOLDERS** -- The names and addresses of all known lien holders and all other parties with an ownership interest in the building.
5. **PROPERTY DESCRIPTION** – Description of the property, including number of units; type of structure and number of stories.
6. **VACANT BUILDING PLAN** --The owner shall submit a vacant building plan which must meet the approval of the Enforcement Officer. The plan, at a minimum, must contain information from one of the following three choices for the property:

- (a) If the building is to be demolished, a demolition plan indicating the proposed time frame for demolition.
  - (b) If the building is to remain vacant, a plan for the securing of the building in accordance with standards provided in §§ 133-68.1 and 133-68.2, if applicable, along with the procedure that will be used to maintain the property in accordance with Article XI, and a statement of the reasons why the building will be left vacant.
  - (c) If the building is to be returned to appropriate occupancy or use, a rehabilitation plan for the property. The rehabilitation plan shall not exceed 365 days, unless the Enforcement Officer grants an extension upon receipt of a written statement from the owner detailing the reasons for the extension. Any repairs, improvements or alterations to the property must comply with any applicable zoning, housing, historic preservation or building codes and must be secured in accordance with § 133-68, if applicable, during the rehabilitation.
7. SIGNATURE – Must be signed by the owner or the designated agent of the property.
  8. TITLE & COMPANY – Include the title and company of officer or agent.

