



## VACANT PROPERTY REGISTRATION FORM

City of Chicago Heights  
1601 Chicago Road • Chicago Heights, IL 60411  
708-756-5328 • Fax 708-756-0040

### PROPERTY INFORMATION:

ADDRESS OF VACANT PROPERTY: \_\_\_\_\_

PARCEL'S TAX IDENTIFICATION NUMBER (IF KNOWN): \_\_\_\_\_

PROPERTY TYPE:  SINGLE FAMILY     MULTIPLE FAMILY     COMMERCIAL     INDUSTRIAL     OTHER

UTILITIES:    WATER  ON     OFF    GAS  ON  OFF    ELECTRICITY  ON  OFF    WINTERIZED  YES  NO

### PROPERTY OWNER: (IF ADDITIONAL OWNERS—PROVIDE OWNERSHIP INFORMATION ON SEPARATE PAGE)

NAME: \_\_\_\_\_

CONTACT NAME (IF BUSINESS): \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ EMAIL: \_\_\_\_\_

### PROPERTY MANAGER/EMERGENCY CONTACT:

COMPANY NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

BUSINESS PHONE: \_\_\_\_\_ 24-HOUR PHONE: \_\_\_\_\_

### LEGAL/LITIGATION INFORMATION FOR PROPERTY (FORECLOSURE/BANKRUPTCY):

CASE NAME: \_\_\_\_\_ CASE NUMBER: \_\_\_\_\_

COURT NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PLAINTIFF(S): \_\_\_\_\_

DEFENDANT(S): \_\_\_\_\_

CASE STATUS: \_\_\_\_\_

**TOXIC/FLAMMABLE/HAZARDOUS MATERIALS STORED OR USED ON SITE:**

MATERIAL NAMES: \_\_\_\_\_

LOCATION OF MATERIALS: \_\_\_\_\_

**ADDITIONAL INFORMATION FOR POLICE/FIRE DEPARTMENT/PARAMEDICS/EMERGENCY RESPONDERS:**

**REGISTRATION FEE: \$200.00 PER PROPERTY ANNUALLY**



Makes check payable to City of Chicago Heights

Please fill out the information requested above, sign, & deliver or mail this form with payment to:

**City of Chicago Heights  
Attn: Code Enforcement  
1601 Chicago Road  
Chicago Heights, IL 60411**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name