



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: \$300.00 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