

The City of Dunbar, West Virginia

Vacant Building Registration Form

Date Filed:		Registration Typ	e: New	Renewal	
Property & Stru	cture Information				
Address:	Tax Map & Parcel ID:				
Status:	Vacant	Open	Secure	Exterior Ma	nintained Abandoned
Utilities:	Electricity:	Water:	Gas:		
	Date Terminated:	Date Terminated:	Date Terminated	:	
Owner(s) Information: (PO BOXES are NOT acceptable) If the property is owned by: • An Individual person: provide the name and address of that person. • An Estate: provide the name and address of the executor. • A Trust: provide the name and address of ALL trustees, grantors and beneficiaries. • A Partnership: the names and addresses of all partners with 10% or greater interest. • A Corporation: provide the names and residence addresses of all officers and directors of the corporation and attach a copy of the most recent franchise tax report filed with the Secretary of State. • Any other form of Unincorporated Association: the names and residence addresses of all principals with a 10% or greater interest. • Otherwise; see definition of Owner in Dunbar City Ordinance 1130.02 for instances of mortgage, vendor in possession, etc					
Name: Address:					
Phone Number:	Cell Phone Number:				
Signature:	Date:				
If the Owner is NOT a resident of West Virginia; please provide a local designated property agent.					
Name:		-	<u> </u>		
Address:					
Phone Number:	Cell Phone Number:				
Signature:			Date:		
Fee Schedule:	72 months & up $= 1			= \$ 200. = \$ 600. = \$ 1,00	00 00.00

Complete and return to: City of Dunbar Phone: 304-766-0218

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 Phone: 304-766-0218

 P.O. Box 483
 Fax: 304-766-0233

Dunbar, WV 25064