



# City of Dayton, Kentucky

514 Sixth Avenue, Dayton, Kentucky 41074

Phone (859) 491-1740 Fax: (859) 491-3538

Website: www.DaytonKY.com

## Vacant Property Registration

Applicants Must Re-Apply Annually

Within ten (10) business days of filing foreclosure action on residential property located within the City of Dayton that is vacant at the time of filing, the Creditor shall submit a vacant property registration form. You are not required to submit a form if the property is not vacant on the date of the filing of the foreclosure. However, you must file this form within ten (10) days of it becoming vacant if it becomes vacant during the foreclosure process. Additionally, no later than sixty (60) days after residential property becomes vacant, the owner of the residential property shall submit a vacant property registration form.

### I. APPLICANT INFORMATION

Name of Applicant (Owner or Creditor):	
Local Contact Person Name & Title located within Kentucky:	
Business or Home Address (Not a Post Office Box):	
Phone Number:	
Fax Number:	Email Address:

### II. PROPERTY INFORMATION

Property Address:
Name of Owner:
Registration Type (Check Appropriate Box): <input type="checkbox"/> Initial Registration <input type="checkbox"/> Renewal Registration

### III. FEE SCHEDULE

*Creditor or owner shall pay any required fees and maintain accurate registration information until the property is transferred to a bona fide owner-occupant or an unaffiliated third party, the property is reoccupied or the property is sold at judicial sale.*

**The fees for the various requirements are as follows:**

1. Initial Registration Fee: \$500.00
2. Annual Registration Fee: \$500.00

**THE ABOVE FEE MAY BE DEFERRED IF REHABBING OR SELLING THE PROPERTY. CONTACT CODE ENFORCEMENT DIRECTOR PHIL LILES AT 491-1600 TO SEE IF YOU QUALIFY.**

### IV. ACKNOWLEDGEMENT & SIGNATURE:

The Applicant (Creditor or Owner or Agent thereof) of this property and undersigned does hereby certify that the information and statements given on the registration are to the best of his or her knowledge, true and correct.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_