



VACANT STRUCTURE REGISTRATION CERTIFICATE

Initial 6 Month Registration
 Renewal ____ month Registration

24-hour Emergency Contact #:					
VACANT STRUCTURE ADDRESS					
Vacant Structure Address:					
Type of Structure:	Residential 1 or 2 units	Residential 3+ units	Commercial, Manufacturing, Storage or any Nonresidential		
Parcel ID # (if known)					
Number of units within the building					
PROPERTY OWNER(S) INFORMATION					
Owner #1 Information					
Name or Business:					
Mailing Address:					
City:		State:		Zip Code:	
Home #:		Mobile #:			
Fax #:		Email:			
Owner #2 Information					
Name or Business:					
Mailing Address:					
City:		State:		Zip Code:	
Home #:		Mobile #:			
Fax #:		Email:			
Name of Person(s) Authorized to be present in the structure per Section 18-454 (6):					
Name:		Phone #:			
Name:		Phone #:			
Name:		Phone #:			
Name:		Phone #:			
Name of Insurance Company					
Name or Business:					
Mailing Address:					
City:		State:		Zip Code:	
Home #:		Mobile #:			
Fax #:		Email:			
Proof of Insurance Attached Sec 18-457 Required Liability Insurance.					
Type of Structure:		Minimum Liability Insurance Amount			
Residential properties of one or two units		\$250,000.00			
Residential Properties of three or more units		\$500,000.00			
Commercial, manufacturing, storage or any nonresidential property		\$1,000,000.00			

STATEMENT OF INTENT SECTION 18-454

Expected date of vacancy (including the date of initial vacancy)	
Plan including timeline for regular maintenance during vacancy	
Plan and timeline for lawful occupancy rehabilitation, removal, or demolition of the structure	
Measures/plans (including timeline) to ensure structure will be secure	
Timeline of structure to be free of nuisance conditions.	

Please check if you are requesting a Waiver Per Section 18-469. **Attach a copy of Signed Waiver.**

City Utility Bills: Section 118-98 (a) of the City’s Codified Ordinances states that the occupant shall be primarily responsible for payment for utility service (water, sewer, and trash) at such premises. I certify that I am aware of the City's Building Safety codes and Zoning (occupancy) codes and the legal ramifications for knowingly violating said codes. I acknowledge that I am responsible for delinquent utility bills due to the City of Edwardsville for this property.

 Owner’s signature
(Signature may be waived via electronic signature)

 Owner’s Printed Name

PAYMENT OF ALL FEES DUE AT TIME OF REGISTRATION

Vacant Structure Fee \$25.00 for six (6) months. At the City’s sole discretion, renewal may be approved upon demonstrated need for a maximum of 3 consecutive 6-month periods for an aggregated maximum of 24 months total vacancy registration. If approved each 3 periods will be \$25.00.

Please return this form with payment to:
 City of Edwardsville
 City Clerk’s office
 118 Hillsboro Avenue
 Edwardsville, IL 62025
 c/o: Vacant Property Registration

vacantproperty@cityofedwardsville.com
www.cityofedwardsville.com