TOWNSHIP OF ABINGTON MONTGOMERY COUNTY, PENNSYLVANIA

VACANT PROPERTY REGISTRATION FORM

NON-RESIDENTIAL PROPERTIES ONLY

In accordance with Ordinance 2156 of the Township of Abington, all information requested below must be provided. Please type or print clearly. Only completed forms will be accepted. *Note that this application applies only to nonresidential properties.* Please complete this form and submit it to the Department of Engineering and Code.

I. <u>PROPERTY INFORM</u>	IATION:		
Full Address of the property	7:		
Tax Parcel Number:			
Date that property was vaca	ted: NOTE: PLEASE PROVI	DE (ATTACH) DOCUMENTATI	ON.
Total number of buildings o	n parcel:		
Total number of units on pa	rcel:		
Square footage of each unit:			
Number of parking spaces a II. <u>CONTACT INFORM.</u>		arcel:	
Owner's Information:			
	NAME		
	ADDRESS:	NUMBER + STREET	
	CITY	STATE	ZIP
	PHONE: LANDLIN	IE	CELL
	E-MAIL		

If the owner is a corporation, LP, LLC, or some other form of partnership, the names, telephone numbers, mailing addresses, and e-mail addresses must be provided for the Chief Executive Officer, the

STATE OF ADMICE

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Registered Officer(s), and the Managing Partners of the Corporation. Please provide (attach) that information on a separate page. One of the persons listed must reside within the Commonwealth of Pennsylvania.

Designated Agent's Information	(THIS SHOULD BE THE	EMERGENCY POINT OF	CONTACT):
	NAME		
	ADDRESS:	NUMBER + STREET	
	CITY	STATE	ZIP
	PHONE: LANDLINE	·	CELL
	E-MAIL		
III. <u>SUBMISSION:</u>			
I hereby attest/swear that the in complete to the best of my know	_	ed on this registration fo	rm is accurate and
The Department of Engineering tions as per the requirements of 0			mandatory inspec-
Principal Owner's Signature:			
Date:			
All checks are required to be made	le payable to the Townsh	ip of Abington.	
If mailing a check, please mail to:	Abington Township Attn: Engineering and 1176 Old York Road Abington, PA 19001	Code Department	



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THE FOLLOWING IS FOR INTERNAL USE ONLY:				
Received by:	Date:			
Permit #:	Permit Fee:			
Check #	Receipt #:			