PA 09-144 REGISTRATION FORM

Please Complete and Sign form.
Filing fee: $100.00. Payable to town of registration.

Vacant Property Address: _____

Registrant/Owner: _____

Mailing address: _____

City: _____ State: _____ Zip: _____

Email: _____

Prefer to be contacted by (check one): U.S. Mail _____ Email: _____

Phone: (_____) _____ Fax: (_____) _____

If the above is a Corporation or Out-of-State Registrant – please list in-state contact information below:

Company/Contact: _____

Mailing address: _____

City: _____ State: _____ Zip: _____

Email: _____

Phone: (_____) _____ Fax: (_____) _____

Property Maintenance/ Management Company (if applicable)

Company/Contact: _____

Mailing address: _____

City: _____ State: _____ Zip: _____

Email:_____

Phone: (_____) _____ Fax: (_____) _____

REGISTRANT'S SIGNATURE:_____ _____

Print Name: DATE