



**CITY OF FLINT
RESIDENTIAL ABANDONED
PROPERTY REGISTRATION FORM**

IDENTITY OF FORECLOSING PARTY, INCLUDE ADDRESS AND TELEPHONE NUMBER:

LOCATION OF PROPERTY:

LAST KNOWN OWNER OF PROPERTY, INCLUDE ADDRESS AND TELEPHONE NUMBER:

DATE FORECLOSURE PROCEEDINGS COMMENCED: _____

DOCKET NUMBER OF FORECLOSURE ACTION: _____

DESCRIPTION OF EXTERNAL CONDITION OF PROPERTY:

IS THERE AN ACCESIBLE STRUCTURE ON PROPERTY: YES / NO

ACTION TAKEN OR PLAN TO BE TAKEN TO ASSURE COMPLIANCE WITH
RESIDENTIAL ABANDONED PROPERTY ORDINANCE:

AGENT OR SERVICING COMPANY AUTHORIZED TO ENTER PROPERTY AND
CONDUCT REPAIRS, INCLUDE ADDRESS AND TELEPHONE NUMBER:

A Fee of \$250.00 is due with the filling of this form.

RETURN FORM TO:

CITY OF FLINT DEVELOPMENT DIVISION, 1101 S SAGINAW ST Rm# S106, FLINT MI 48502 (810) 766-7284