



CITY OF BRIGHTON VACANT BUILDING APPLICATION

200 N. First Street - Brighton, MI 48116 - commdev@brightoncity.org - 810.225.9257

Submit completed application along with fees described below to the address above.

Address of Vacant Building: _____ Parcel ID: _____

Date building became vacant: ____/____/____

Estimated time property to remain vacant: _____

Briefly describe future intent for property: _____

PROPERTY OWNER CONTACT INFORMATION

Name: _____

Mailing Address: _____

Billing Address: _____

Phone: _____ Email: _____

PROPERTY MANAGER OR AGENT CONTACT INFORMATION If same as above check box

Manager or Agent's Name: _____

Company Name: _____

Mailing Address: _____

Phone: _____ Email: _____

EMERGENCY CONTACT: For Fire & Police Use

Name: _____ Phone: _____

Name: _____ Phone: _____

AFFIDAVIT: I hereby certify that the above information and answers are correct and true; that I am the legal owner of the premises at the above location. I have been provided with a copy of the Vacant Property Registration Ordinance and I am familiar with the provisions set forth in such sections. Further, I hereby agree that the City of Brighton Community Development Department, Police, Fire and Livingston County Building Department shall be permitted to inspect the interior and exterior of the above-described property a minimum of two (2) times per year upon reasonable notice and at reasonable times.

Date: ____ / ____ / ____

Signature of Owner: _____

Registration fee \$115.00

Monthly administrative fee of \$135.00 due by the first of each month in accordance with Section 18-107 of the City of Brighton Code of Ordinances.