



# CITY OF VACAVILLE FIRE DEPT. CODE ENFORCEMENT DIVISION



## VACANT BUILDING REGISTRATION FORM

Any owner of a foreclosed or vacant building shall register the property in the City of Vacaville's monitoring program within thirty (30) days of the building becoming vacant in accordance with Vacaville Municipal Code (VMC) section 8.10.030.

Complete the form below and forward to the City of Vacaville Fire Department

E-mail to:

[CodeEnforcement@cityofvacaville.com](mailto:CodeEnforcement@cityofvacaville.com)

Mail to:

Vacaville Fire Department  
Attn: Code Enforcement  
650 Merchant Street  
Vacaville, CA 95688

Fax to:

707-449-5486

**Property Address:** \_\_\_\_\_

Assessor's Parcel No.: \_\_\_\_\_ Vacancy Date: \_\_\_\_\_

Vacant and foreclosed buildings which are neglected and not maintained can result in the physical deterioration of a neighborhood and other health and safety problems to the community. The purpose of VMC Section 8.10.030.A.4 is to provide standards for maintaining vacant buildings and to establish a monitoring program for those that are neglected.

### Property Owner Information

Name: \_\_\_\_\_ Phone # \_\_\_\_\_ Cell # \_\_\_\_\_  
Please Print

Mailing Address: \_\_\_\_\_  
Street City, State

Email Address: \_\_\_\_\_

### Property Management Company/Other (if different from the owner)

Name: \_\_\_\_\_ Phone # \_\_\_\_\_ Cell # \_\_\_\_\_  
Please Print

Mailing Address: \_\_\_\_\_  
Street City, State

Email Address: \_\_\_\_\_

**\*\*\* Designation of a Property Management Company/Other does not relieve the owner of any obligation. \*\*\***

### Beneficiary/Trustees identified on the Deed of Trust (if applicable)

Name: \_\_\_\_\_ Phone # \_\_\_\_\_ Cell # \_\_\_\_\_  
Please Print

Mailing Address: \_\_\_\_\_  
Street City, State

Email Address: \_\_\_\_\_

**DEPARTMENTAL USE ONLY:** Received/Registration Date \_\_\_\_\_