

City of Cool Valley Public Works Department

100 Signal Hill Dr., St. Louis, MO 63121

Phone 314.521.3500 Fax 314.942.8701

RESIDENTIAL VACANT PROPERTY REGISTRATION FORM

The purpose of the City of Cool Valley Residential Vacant Property Program is to help protect the health, safety and welfare of the citizens by preventing blight, protecting property values and neighborhood integrity avoiding the creation and maintenance of nuisance residential dwellings and buildings. A building or structure will be deemed vacant if the property is not legally or currently occupied. Vacant properties will be monitored for compliance with property maintenance and safety requirements. Residential structures that are vacant or will be vacant for a period greater than 6 months are subject to City Ordinance Section 500.190 Property in violation of property maintenance and safety requirements will be subject to City Ordinance Section 500.190 "Vacant Residential Structure Fees"

PROPERTY ADDRESS	

<i>Loan Companies</i> ONLY	House Vacant & Foreclosure Complete? Yes <input type="checkbox"/> No <input type="checkbox"/>

PROPERTY OWNER	

Name _____	
Address _____	
City _____	State _____ ZIP _____
Phone Number: _____	E-MAIL Address: _____

PROPERTY MANAGER/AGENT	

Name _____	
Address _____	
City _____	State _____ ZIP _____
Phone Number: _____	E-MAIL Address: _____

UTILITY STATUS	

Gas Service Disconnected <input type="checkbox"/>	Proper Working Order <input type="checkbox"/>
Water Service Disconnected <input type="checkbox"/>	Proper Working Order <input type="checkbox"/>
Electric Service Disconnected <input type="checkbox"/>	Proper Working Order <input type="checkbox"/>



Return completed form with payment of \$200.00 payable to:

City of Cool Valley

AUTHORIZATION:

By signing and submitting this document, I am authorizing the City of Florissant to utilize this information, certifying that I have the legal authority to do so. I affirm that the information provided is accurate to the best of my knowledge and I am granting permission to the City of Florissant authorized staff to access the exterior of the property for inspection purposes.

Signature

Date

Printed name

Driver License or State ID#

OFFICE USE ONLY

AMOUNT \$ _____ CASH CHECK MO

RECEIPT # _____

DATE _____

CLERK _____