

**Code Enforcement & Building Inspection Department****VACANT BUILDING REGISTRATION FORM**

401 Davis Avenue, Elkins WV 26241

PHIL ISNER, pisner@cityofelkinswv.com

Date Filed: \_\_\_\_\_

Registration Type (circle):    New    Renewal

**Property & Structure Information:**

Address: \_\_\_\_\_ Tax map &amp; Parcel ID: \_\_\_\_\_

Status (circle all that apply):    Vacant    Open    Secure    Exterior Maintained    Abandoned

Utilities (circle):    Electricity    ON / OFF    Water    ON / OFF    Gas    ON / OFF

Date Utility Terminated:    \_\_\_\_\_    \_\_\_\_\_    \_\_\_\_\_

**Owner(s)\* Information (P.O. Boxes are not acceptable)**

Name: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_ Signature: \_\_\_\_\_

**If owner\* is not a resident of West Virginia, please provide a designated local property agent:**

Name: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_ Signature: \_\_\_\_\_

**\*If the property is owned by:**

- An individual person, provide the name and residence of the individual person;
- An estate, provide the name and business address of the executor;
- A trust, please provide the name and address of all trustees, grantors, and beneficiaries;
- A partnership, provide the names and residence address of all partners with an interest of 10% or more
- A corporation, provide the names and residence addresses of all officers and directors of the corporation and attach a copy of the most recent annual franchise tax report filed with the WV Secretary of State;
- Any other form of unincorporated association, provide the names and addresses of all principals with an interest of 10% or more;
- Otherwise, see definition of owner listed in §1718.03 for instances of mortgagee, vendee-in-possession, assignee of rents, etc.

**Fee Schedule**

&lt; 1year = \$0

1 year = \$200

2 years = \$400

3 years = \$600

4 years = \$800

5 years = \$1600

&gt;5 years = \$1600+\$300 per year over

**The fee is determined by the  
number of years vacant,  
regardless of varying ownership.**

STATE OF \_\_\_\_\_, COUNTY OF \_\_\_\_\_; TO WIT:

I, \_\_\_\_\_, a notary public in and for said County and State,  
do hereby certify that \_\_\_\_\_, whose name is signed to the  
writing above, has this day acknowledged the same before me. Given under my hand this  
\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

My Commission expires: \_\_\_\_\_

Notary Public: \_\_\_\_\_

(SEAL)