



Village of Glendale Heights  
Community Development Department  
300 Civic Center Plaza  
Glendale Heights, Illinois 60139  
(630) 260-6030

### VACANT BUILDING REGISTRATION FORM

Date: \_\_\_\_\_  Registration Fee: **\$100**  Inspection Fee: **\$250 (Residential)**  
**\$500 (Other)**

New Registration  Renewal of Registration  Amended Registration

Address of Vacant Building: \_\_\_\_\_

Property Index Number/Parcel Number: \_\_\_\_\_

Single Family Residential  Multi-Family Residential  Commercial/Industrial  
Number of Units: \_\_\_\_\_ Number of Units: \_\_\_\_\_

Owner(s) Name: \_\_\_\_\_

Owner(s) Address: \_\_\_\_\_

Owner(s) Email: \_\_\_\_\_

Owner(s) Home Phone: \_\_\_\_\_ Owner(s) Work Phone: \_\_\_\_\_

Owner(s) Cell Phone: \_\_\_\_\_ Owner(s) Fax Number: \_\_\_\_\_

Pending Litigation  Yes  No Case Number: \_\_\_\_\_

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

Bankruptcy Number: \_\_\_\_\_ Foreclosure Number: \_\_\_\_\_

**PROVIDE THE FOLLOWING INFORMATION FOR ALL PERSONS WITH ANY LEGAL INTEREST IN THE PREMISE (Use separate sheet of paper, if necessary)**

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

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

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

Home Phone: \_\_\_\_\_ Other Phone: \_\_\_\_\_

**PLEASE IDENTIFY A NATURAL PERSON 21 YEARS OF AGE OR OLDER WHO MAINTAINS A PERMANENT ADDRESS IN DUPAGE COUNTY, ILLINOIS THAT WILL ACCEPT SERVICE ON BEHALF OF THE OWNER.**

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

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

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

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Fax Number: \_\_\_\_\_

**VACANT BUILDING PLAN**  
(Use separate sheet of paper, if necessary)

Description of plan of action: \_\_\_\_\_ Schedule: \_\_\_\_\_

Building repairs: \_\_\_\_\_

Nuisance abatement: \_\_\_\_\_

Property maintenance: \_\_\_\_\_

Future plans for building:  Demolition  Sale  Rental

Additional Comments: \_\_\_\_\_

If the property owner fails to submit a vacant building plan, the Village may determine the plan. The Village will determine whether or not the provided plan complies with the Village Code. Failure to have an approved vacant building plan or failure to comply with the vacant building plan shall constitute a violation and the property owner may subject to penalties as found in the Village Code.

**SUBMIT EVIDENCE OF LIABILITY INSURANCE WITH THIS APPLICATION.**

The insurance requirements are as follows:

Residential 1-3 Units \$500,000.00	Residential 4-11 Units \$750,000.00	Residential 12-48 Units \$1,000,000.00	Residential 49+ Units \$2,000,000.00	Nonresidential \$2,000,000.00
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**By signing this application form, the property owner is acknowledging "acceptance of notice by posting". As a result, the owner is consenting to service of notices which are required to be sent by posting on the premises if the owner fails to renew the registration or fails to provide the Village with accurate and current information with respect to the person designated as the individual to accept notices and service of processes.**

Signature of Owner \_\_\_\_\_ Date \_\_\_\_\_

**CALL THE COMMUNITY DEVELOPMENT DEPARTMENT AT 630-260-6030 WITHIN 30 DAYS TO SCHEDULE A VACANT BUILDING INSPECTION.**