

Village of Amityville
 21 Ireland Place
 Amityville, NY 11701-2943

VACANT STRUCTURE REGISTRATION APPLICATION

STREET ADDRESS OF PROPERTY BEING REGISTERS (AS LISTED ON DEED)

Property Address: _____ _____ _____ _____	SCTM#: (Section) (Block) (Lot)
Fire District:	Ambulance District:
Is this a New or Renewal Registration? _____	New Registration _____ Renewal Registration

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Office Use Only		
Check #:	Process Date:	Receipt #:

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Please note: If the owner or owners do not reside within the State, the registration statement must also provide the contact information for a local agent who resides within the State and who is authorized to accept service of process on behalf of the owners. (Attach Additional Sheets If Necessary)

1. If the owner is a corporation or LLC, provide the names, residence addresses, telephone numbers and email addresses of all officers, directors and, managing member as well as a copy of the most recent annual franchise tax report filed with the Secretary of State.
 - a. _____
 - b. _____
 - c. _____
 - d. _____
2. If an estate, the name, business address, telephone number and email address of the executor of the estate.
 - a. _____
3. If a trust, the names, addresses, telephone numbers and email addresses of all trustees and grantors.
 - a. _____
 - b. _____
4. If a partnership, the names, residence addresses, telephone numbers and email addresses of all partners with an interest of 10% or greater.
 - a. _____
 - b. _____
 - c. _____
 - d. _____
5. If any other form of unincorporated association (ie: D/B/A), the names, residence addresses, telephone numbers and email addresses of all principals with an interest of 10% or greater.
 - a. _____
 - b. _____
 - c. _____
 - d. _____
6. If an individual person, the name, residence address, telephone number and email address of that individual person.
 - a. _____
 - b. _____
7. Contact Person in the event of an emergency affecting the public health, safety or welfare.

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Name: _____ Phone #: _____

Mailing Address: _____ Email: _____

I do hereby certify that all statements made by me in this vacant building registration are true and correct to the best of my knowledge, information and belief, further, I understand that in the event that I have knowingly and willfully made any false statements, I will be liable for punishment in accordance with all applicable laws and statutes.

SIGNATURE _____

APPLICANT'S NAME _____

TITLE _____

Acknowledgment of Individual

STATE OF)

COUNTY OF) SS.:

On the _____ day of _____ in the year 20__ before me, the

undersigned, personally appeared _____, personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.

Notary Public

Acknowledgment of Corporation

STATE OF)

COUNTY OF) SS.:

On the _____ day of _____ in the year 20__ before me

personally came _____, to me known, who, being by me duly sworn, did depose and say that he/she/they reside(s) in _____ (if the place of residence is in a city, include the street and street number, if any, thereof)" that he/she/they is (are) the _____ (president, or other officer or director or attorney in fact duly appointed) of the (name of corporation, the corporation described in the and which executed the above instrument; and that he/she/they signed his/her/their name(s) thereto by authority of the board of directors of said corporation.

Notary Public