TOWN OF GLENVILLE Building Department

18 Glenridge Road, NY 12302-4518 (518) 688-1200, Option #8 – Fax (518) 384-0140 www.townofglenville.org

VACANT BUILDING REGISTRATION APPLICATION

Please contact the Building Department at 518-688-1200, Ext 8 Prior to submitting this application

Address of vacant property_____

Tax map ID#_____

1. Description of the premises:

Residential or Commercial (circle one)

Square Footage of building: _____

Number of stories: _____

Age of building: _____

Last use of building: _____

Other pertinent information: _____

2. Names, addresses and phone numbers of all owners. If the owner is a corporation, limited liability, company, or partnership, the address for each director, manager, or partner, as the case may be. The address(es) must include a street address; a post office is not acceptable:

3. Name, address and phone number for property management. The address must include a street address; a post office box is not acceptable.

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ow	Names, addresses and phone numbers of all lienholders and all other parties with an ownership interest in the building. Each address must include a street address; a post office box is not acceptable:		
imited		ber where a responsible natural person (not a corporation, b) can be reached at all times during business and non-	
6. A	vacant building plan. (select o	ne)	
	a. Building is scheduled to be demolished on		
	b. Building will remain vacant.		
	i. A plan for securing and maintaining the building must be provided. Also		
	required is a statement as to why this building will remain vacant.		
	c. Building will be rehabilitated		
	i. A rehabilitation plan to include a timetable not exceeding 365 days and progress		
	benchmarks not exce	eeding 3 month intervals must be included.	
7. Re	equired fee payable to Town o	f Glenville	
	1 & 2 family dwelling:	1 st year \$100 2 nd year \$200 3 rd year \$300 4 th year \$400 5 th year \$500 Each year after 5 \$500	

Contact Building Dept for fee schedule. Multi-Family & Commercial: