City of Saint Paul Department of Safety and Inspections VACANT BUILDING REGISTRATION FORM

* Date: 5/16/14			
Planned disposition of this building (please check one): I plan to rehabilitate this structure commencing (date): I plan to demolish (wreck and remove) this building by (date): I am willing to authorize the City of Saint Paul to demolish and remove this building(s).			
		This building is <u>vacant as a result of fire damage</u> . It as the property owner, want to claim registration and date of the fire. I intend to repair and reoccupy the building of the fire.	fee exemption status for ninety (90) days from the nilding.
Responsible Party: Persons/organizations who will ensure compliance with the ordinance:			
NAME ADDRESS PRIM	ARY PHONE ALTERNATE PHONE		
Persons, lien holders, mortgagees, mortgagors and other interested parties known to me: NAME ADDRESS PRIMARY PHONE ALTERNATE PHONE			
All persons listed here will receive letters for the annual fee renewal. Also use this form to de-register your interest.			
Print Your Name (legibly) Dutz Coppe 6 6/143 Signature Date of Birth 807 Summer ST unt 5 Address Marchester MA 01944 City State Zip 561-245-1508 SAME main contact telephone alternate phone dalekoppe (@ Aol. Com Email address (print legibly)	NOTE NEW VB FEE of \$1,440 effective for registrations due on or after January 1, 2013. INSTRUCTIONS: Complete and return this form with your VB registration fee payment of \$1,440.00. Make checks payable to: City of Saint Paul Credit cards are accepted Make Payment at, or mail payment to: City of Saint Paul Department of Safety and Inspections Code Enforcement — Vacant Buildings 375 Jackson Street, Suite 220 St. Paul, MN 55101-1806 Thank you for your cooperation		
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