

VILLAGE OF PERRY

VACANT BUILDING REGISTRATION GUIDELINES AND APPLICATION

L.L. NO. 3-2021: View Law: <https://ecode360.com/PE2218/laws/LF1386695.pdf>

SECTION II. DEFINITIONS

F. VACANT BUILDING - A building, or 50% of a building, which is any one or more of the below: 1. Unoccupied and unsecured; 2. Unoccupied and secured by other than normal means. 3. Unoccupied and is unsafe as determined by the Code Enforcement Office. 4. Unoccupied and for which the Code Officer has issued an order to correct 2 or more code violations or has authorized the remediation of 2 or more violations in a twelve month period. 5. Illegally occupied; or 6. Unoccupied for a period of time over 30 days.

***Please complete and return one (1) form for EACH property within thirty (30) days of official notice**

**MAIL TO: ATTN Vacant Property
Village Clerk
46 North Main Street,
Perry, NY 14530**

An incomplete form will NOT be accepted

Property Type	Year 1	Year 2	Year 3	Each Subsequent Year
All Buildings with an Approved Rehabilitation Plan	\$0	If no extension is granted, then the maximum fee for the relevant property type will be charged each subsequent year.	If no extension is granted, then the maximum fee for the relevant property type will be charged each subsequent year.	If no extension is granted, then the maximum fee for the relevant property type will be charged each subsequent year.
1-3 Unit Residential	\$250	\$500	\$750	\$1,000
4+ Residential Unit and All Commercial Property	\$500	\$1,000	\$1,500	\$2,000

Phone: (585) 237-2216

46 North Main Street, Perry, New York 14530

TDD: 1 (800) 662-1220

This institution is an equal opportunity provider and employer.

If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at http://www.ascr.usda.gov/complaint_filing_cust.html, or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter to us by mail at U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington D.C. 20250-9410, by fax (202) 690-7442 or email at program.intake@usda.gov.

VILLAGE OF PERRY

TYPE OF APPLICATION

() Original Registration

() Update of Application Previously Submitted (must be within 30 days of change)

Date of Application Change: ____/____/____

() Renewal Registration Date of Original Registration: ____/____/____

PROPERTY TYPE: () Commercial () Residential () Multi-Purpose () Other _____

REHABILITATION PLAN () Yes () No

PROPERTY DESCRIPTION

Building Address (Include Building Number) _____

Most Recent Use of Building/Purpose: _____ Age of Building: _____

Date of Vacancy: _____ Estimated length of time building will be vacant: _____

Sq. Footage of Building _____ No. of Stories above ground level ____ Below ____

OWNERSHIP INFORMATION

Owner Name(s) _____

Mailing Address (Number, Street, City, State, Zip):

Telephone Number/Alternate Telephone Number (____) ____-____/(____) ____-____

Email Address _____@_____.com

LIEN HOLDER INFORMATION

Name of Lien Holder _____

Contact Name Phone Number (____) ____-____/(____) ____-____

Mailing Address: _____

VILLAGE OF PERRY

VACANT BUILDING PLAN

Name of Maintenance Company/ Property Manager: _____

Projected Start Date ____/____/____ Completion Date ____/____/____ Permits Obtained: () Yes () No

Contact Person: _____ Phone Number: _____

General description of property use after rehabbed:

() Lease () Sell () Own () Other _____

Specific Use (i.e. beauty salon, 1- unit rental, etc.) _____

Describe in Detail the Rehabilitation Plan for Property (Add separate sheet if necessary):

SIGNATURES The undersigned attests to the above information as accurate. Any falsification may result in the denial or revocation of the certificate of registration for a vacant building.

Owner # 1 Signature _____ Date ____/____/____

Owner # 2 Signature _____ Date ____/____/____

****Fee Will Be Assessed Upon Receipt of Application****

***FOR OFFICE USE ONLY* Please allow 10 days for your application to be processed**

This Permit # _____ is hereby _____ Approved, _____ Disapproved

Fee: _____ *Due within thirty days of approval.*

Zoning Enforcement Officer (ZEO): _____

Date of approval: _____ (or) Date of denial: _____

ZEO Notes:

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