



6281 Pearl Road
Parma Heights, Ohio

440-884-9607
parmaheights.us

APPLICATION FOR FORECLOSURE REGISTRATION

Foreclosure Registration-Parma Heights Codified Ordinances Chapter 634.09

APPLICANT: The fee for registration of a foreclosure action and the foreclosed property shall be \$250.00 for a residential property (one-or-two family) and \$500.00 for a commercial property (all other than one- or two-family structures). The fee shall be paid at the time of notification. The fee for foreclosure shall be \$400.00 for residential property submitted after the 10th day following the filing of foreclosure and \$600.00 for commercial property. No registration shall be accepted or considered submitted until the registration has been completely and accurately filled out and the applicable fee has been paid.

① Property Information (print clearly)

Property Address: _____
Property Parcel Number: _____
Single Family Two Family Commercial Other: _____

② Property Owner Information

Current Property Owner: _____
Address: _____
City, State, Zip Code: _____
Email: _____ Phone: _____

③ Name of Local/Authorized Agent (attach additional information as necessary)

Name: _____
Address: _____
City, State, Zip Code: _____
Email: _____ Phone: _____
Are you filing on behalf of a taxing authority (exempt from fee)? Yes No

④ Utility Shut-Off Dates

Gas: _____
Electric: _____
Water: _____
Weatherization: _____

By signing this application, the applicant acknowledges the City's requirements and received of a copy of Chapter 634 of the City of Parma Heights Codified Ordinances and understands the restrictions of registration requirements. Registration is valid on year from the date of statement. The owner shall renew the registration upon expiration for as long as the property remains vacant. Authorized agent must reside, or have office in Cuyahoga County. PO Box is not an acceptable address for the property. The owner, agent, or party in control of vacant property shall inspect the property monthly for any violation of the Codified Ordinances and other applicable laws. A written report or such inspection shall be provided to the Director of Public Service upon request.

Applicant Signature (required) Date

Year: _____ Date paid: _____ Total paid: _____ check cash