

## CITY OF ALLENTOWN AT RISK PROPERTY REQUEST FOR <u>DE</u>-REGISTRATION

## ONLY FULLY COMPLETED FORMS WITH SUPPORTING DOCUMENTATION WILL BE ACCEPTED

"Must be TYPED or PRINTED CLEARLY in BLACK or BLUE INK"

Date:/		Supporting Documents Included
Address of Property:		
Parcel #:	Owners(s) Name:	
Owners Mailing Address:		
Phone #:	_Owner's E-Mail Addre	ess:
SELECT THE REASON FOR DE REQUIRED.	REGISTRATION AND I	NCLUDE THE SUPPORTING DOCUMENTATION
Property Sold		Please include Agreement of Sale and Presale
		ordered from the City of Allentown.
Mortgage Satisfied		Please Provide recorded satisfaction.
Property is no longer an at R	isk 🔲	Please provide appropriate paperwork to show
		Risk is removed.
		Is the property □ Vacant or □ Occupied?
, By affixing my initials to this document, I hereby affirm that I have thoroughly reviewed, comprehend, and consent to comply with the enclosed At-Risk Property Registration Ordinance 15026 as instituted by the City of Allentown. Name of Person Filing Registration (Print): I,		
(Sign):	•	Registration is accurate and truthful.

Submit Form to: At Risk Property Registration Building Standards and Safety Department 435 Hamilton Street Room 3<sup>rd</sup> Floor Allentown, PA 18101 610-437-7604 Register@allentownpa.gov

Updated: May 31<sup>st</sup>, 2024