



CITY OF ALLENTOWN

VACANT PROPERTY DEREGISTRATION

Today's Date: _____

Address of Vacant Property: _____ Parcel # _____

Owners(s) Name: _____

Phone # _____ Owner's E-Mail Address: _____

Owners Address: _____

Reason for Deregistration: _____

I hereby certify that all the information I have provided for this Registration is true and correct. Name of Person Filing Registration

(Printed) _____

(Signed) _____