

MASSILLON BUILDING DEPARTMENT CODE ENFORCEMENT DIVISION MUNICIPAL GOVERNMENT ANNEX 151 LINCOLN WAY EAST, MASSILLON, OH 44646 PHONE 330.809.0235 | FAX 330.830.1782 www.massillonohio.gov

SELECT ONE: FORECLOSURE REGISTRATION FORECLOSURE BONDING

FORECLOSURE/BOND REGISTRATION FORM

FURECLUSURE PRUPERTY IN			C	TATE.	71D.	
ADDRESS: PARCEL NUMBER:		_ CITY:	5	IAIE:	ZIP:	
PARCEL NUMBER: NWNED /FORMED NWNED / MORTO	ACED:					
OWNER/FORMER OWNER/ MORTO CURRENT ADDRESS:	AULIN.	CITV	ς'	ΤΔΤ Ε·	7ID·	
PHONE:		_ CITT _ FMAII.	5	IAIL		
		_ [] [] [] [] [] [] [] [] [] [] [] [] []			_	
MORTGAGEE/ENTITY FILING	FORECLOSU	RE				
NAME:	. I ORLGEODO	T.L				
NAME:ADDRESS:		CITY:	S'	TATE:	ZIP:	
CONTACT/REPRESENTATIVE:		_				
CONTACT/REPRESENTATIVE: PHONE:		EMAIL:				
FORECLOSURE FILING						
CASE NUMBER:	FILING DATE:		STATUS:	OPEN	CLOSED	
*PLEASE INCLUDE A COPY OF THE	FORECLOSURE C	OMPLAINT				
VACANT PROPERTY MAINTE						
PERSON/ENTITY MAINTAINING PR	OPERTY:					
ADDRESS:PHONE:		_ CITY:	S'	TATE:	ZIP:	
PHONE:						
	REGIS'	TRATION FEES				
		NOTE:				
SHOULD THE PROPERTY BECOME \						
THIS BOND SHALL BE RETAINED FO						
ADDITIONAL \$1,000.00 WILL BE RE	TAINED FOR TH	E HOUSING MARKET	REINVESTM	ENT PROC	GRAM (PER	
ORDINANCE NO. 108-2015).						
		RESIDENTIA	AL .	C	OMMERCIAL	
FORECLOSURE PROPERTY REGIST	'RATION FEE	\$100.00			\$300.00	
VACANT FORECLOSURE PROPERTY BOND		\$10,000.00		\$10,000.00		
IN ACCORDANCE MUTIL THE CITY	OF MACCH LON 4		ED 4222 DV	CICNING	DELOW VOIL	
IN ACCORDANCE WITH THE CITY	OF MASSILLON C	UKDINANCE CHAP I	EK 1323, BY	SIGNING	BELOW YOU:	
•CERTIFY that the information prov	rided ahove is acc	rurate and AGREE to	notify the C a	nde Offici:	al of any undates	
1		•	,		, <u>,</u>	
•CERTIFY that the property has bee				•		
 AGREE that once a vacant property 	' is registered it w	vill be inspected by a	Code Official	or their d	esignee.	
APPLICANT SIGNATURE		PRINTED NAME		DATE		
SUBMIT COMPLETED		•			,	
CODE ENFORCEMENT 151	LINCOLN WAY F	EAST, MASSILLON, O)H 44646 P	HONE: 33	0.830.1724	
FOR OFFICE USE ONLY PAR	CEL NIIMRED.		PAVME	PAYMENT DATE:		
		PAYMENT DATE: BOND NO: AMOUNT PAID:				
PAYMENT METHOD:	CHECK NO:	RONDNO	•	2 N/I () I N/I (PAIII	