



Kathy Catazaro-Perry, Mayor

SELECT ONE:  
FORECLOSURE REGISTRATION  
FORECLOSURE BONDING

### FORECLOSURE/BOND REGISTRATION FORM

#### FORECLOSURE PROPERTY INFORMATION

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
PARCEL NUMBER: \_\_\_\_\_  
OWNER/FORMER OWNER/ MORTGAGER: \_\_\_\_\_  
CURRENT ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

#### MORTGAGEE/ENTITY FILING FORECLOSURE

NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
CONTACT/REPRESENTATIVE: \_\_\_\_\_  
PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

#### FORECLOSURE FILING

CASE NUMBER: \_\_\_\_\_ FILING DATE: \_\_\_\_\_ STATUS: OPEN CLOSED  
\*PLEASE INCLUDE A COPY OF THE FORECLOSURE COMPLAINT

#### VACANT PROPERTY MAINTENANCE INFORMATION

PERSON/ENTITY MAINTAINING PROPERTY: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

#### REGISTRATION FEES

**NOTE:**

SHOULD THE PROPERTY BECOME VACANT, THE POSTING OF A \$10,000.00 CASH BOND IS REQUIRED. 10% OF THIS BOND SHALL BE RETAINED FOR ADMINISTRATIVE FEES (PER ORDINANCE CHAPTER 1323) AND AN ADDITIONAL \$1,000.00 WILL BE RETAINED FOR THE HOUSING MARKET REINVESTMENT PROGRAM (PER ORDINANCE NO. 108-2015).

	RESIDENTIAL	COMMERCIAL
FORECLOSURE PROPERTY REGISTRATION FEE	\$100.00	\$300.00
VACANT FORECLOSURE PROPERTY BOND	\$10,000.00	\$10,000.00

#### IN ACCORDANCE WITH THE CITY OF MASSILLON ORDINANCE CHAPTER 1323, BY SIGNING BELOW YOU:

- CERTIFY that the information provided above is accurate, and AGREE to notify the Code Official of any updates
- CERTIFY that the property has been inspected by the Owner/Agent at the time of filing the Property Registration
- AGREE that once a vacant property is registered it will be inspected by a Code Official or their designee.

\_\_\_\_\_  
APPLICANT SIGNATURE PRINTED NAME DATE

SUBMIT COMPLETED FORM AND PAYMENT (PAYABLE TO CITY OF MASSILLON) TO:  
CODE ENFORCEMENT | 151 LINCOLN WAY EAST, MASSILLON, OH 44646 | PHONE: 330.830.1724

<b>FOR OFFICE USE ONLY</b>	PARCEL NUMBER: _____	PAYMENT DATE: _____
PAYMENT METHOD: _____	CHECK NO.: _____	BOND NO.: _____
	AMOUNT PAID: _____	