



Code Compliance Division

Registration Form For Abandoned Residential Property

Please fill out the information requested below and deliver this form with payment to Building Department or mail to **City of Leesburg, Building: Foreclosure Registration, P.O.Box 490630, FL 34749.**

Is this a New Renewal registration?

ABANDONED RESIDENTIAL PROPERTY INFORMATION:

Registered Residence Address: _____

Leesburg, FL zip code: _____ Date Property Inspected: _____

LENDER/LIENHOLDER INFORMATION:

Lender/Lienholder: _____

Contact Name: _____ Contact Phone (###) ###-#### : _____

Mailing Address: _____

Physical Address (If Above is PO Box): _____

E-mail: _____

LOCAL INDIVIDUAL OR PROPERTY MANAGEMENT INFORMATION:

Responsible for security and maintenance of the abandoned property.

Property Manager: _____ Business Tax Receipt (Bus. License): _____

Contact Name: _____ Local 24 Hour Phone (###) ###-####: _____

Local Mailing Address (No PO Box): _____

E-mail: _____

For Internal Use

REGISTRATION FEE: \$150 per residence (renewal \$100). If paying for multiple addresses with one check please make sure to attach the registration form for each property with payment. Make Checks Payable to: City of Leesburg

Initiated By (Print Name): _____

Signature _____

Date _____