



CITY OF BENICIA FINANCE DEPARTMENT VACANT BUILDING REGISTRATION FORM

Any owner of a foreclosed or vacant building shall register the property in the City of Benicia's monitoring program within ten (10) days of the building becoming vacant in accordance with [Benicia Municipal Code \(BMC\)](#) section 8.50.060. Please fill out the information requested below and deliver this form, with the annual registration fee of \$157.11, to **Finance Department, City of Benicia, 250 East L Street, Benicia, CA 94510.**

Building Address: _____

Assessor's Parcel No.: _____ Vacancy Date: _____

Does the building have:

A swimming pool or hot tub?

An alarm system?

Working locks on doors & windows?

Do the grounds have any known hazardous conditions? If yes, please specify on reverse.

Vacant and foreclosed buildings which are neglected and not maintained can result in the physical deterioration of a neighborhood and other health problems to the community. The purpose of [BMC](#) Chapter 8.50 is to provide standards for maintaining vacant buildings and to establish a monitoring program for those that are neglected.

Owner Information

Name _____ Phone # _____ Cell # _____
Please print

Address _____
Street City, State

Email Address _____

An owner who lives within 60 miles of the foreclosed building may designate himself or herself as the responsible agent. An owner who lives more than 60 miles from the foreclosed building shall designate a responsible agent who lives within or whose place of business is within the City of Benicia.

Responsible Agent (if different from the owner)

Name _____ Phone # _____ Cell # _____
Please print

Address _____
Street City, State

Email Address _____

The responsible agent is authorized to act on behalf of the owner with regard to all [BMC](#) requirements, including the acceptance of all official notices on behalf of the owner. The responsible agent shall be an authorized agent and signatory of the owner.

***** Designation of a responsible agent does not relieve the owner of any obligation. *****

Beneficiary/Trustee identified on the Deed of Trust (if applicable)

Name _____
Please print

Address _____
Street City, State

Please sign below to indicate that you have read and understand [Benicia Municipal Code](#) Chapter 8.50 (Maintenance and Registration of Neglected, Vacant and Foreclosed Properties), which can be viewed online at www.ci.benicia.ca.us, or a copy can be obtained from the City Clerk's Office.

Owner _____ Date _____

Responsible Agent _____ Date _____
If different from owner

The registration shall be valid for one year starting on the registration date. You are required to renew your registration every year that your property is vacant. You will not be notified when your registration has expired or when renewal is required. If the building is sold or if any of the above information changes, please contact the Finance Department at 707-746-4225.

Hazardous Conditions

DEPARTMENTAL USE ONLY: Received/registration Date _____