



1301 12<sup>TH</sup> STREET  
SUITE 104  
ALTOONA PA 16601

PHONE (814) 949-2456  
FAX (814) 949-2202

**DEPARTMENT OF CODES AND INSPECTIONS**

**VACANT PROPERTY REGISTRATION FORM**

*Entire form must be filled out completely and accurately to be accepted. Mail or bring to the address listed above.*

**DATE:** \_\_\_\_\_

**VACANT PROPERTY ADDRESS:** \_\_\_\_\_

**NO. OF YEARS PROPERTY HAS BEEN VACANT:** \_\_\_\_\_

**OWNER NAME:** \_\_\_\_\_

**OWNER ADDRESS (P.O. boxes not acceptable):** \_\_\_\_\_

**OWNER PHONE:** \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

**IF OWNER IS A CORPORATION, PLEASE PROVIDE THE FOLLOWING:**

**NAME OF PRINCIPAL OF CORP.:** \_\_\_\_\_

**RESIDENT AGENT'S NAME:** \_\_\_\_\_

**RESIDENT AGENT'S ADDRESS:** \_\_\_\_\_

*(Must be an individual who will accept service of process on behalf of the corporation)*

**If an owner fails to return this registration form for all their vacant properties, to amend the registration statement, if applicable, or fails to pay the registration fee, the City of Altoona may institute criminal proceedings against the owner of the property. An owner is also subject to a potential fine. In addition, the City of Altoona may bring civil action to collect any unpaid registration fees.**

**Please call the City of Altoona Department of Codes and Inspections for any questions you have about the completion and/or submittal of this form at (814) 949-2456.**

*If owner's mailing address has changed or changes within the next year or the property is sold to a new owner, the owner is responsible to update this information and must notify the Department of Code Enforcement within thirty (30) days of such change.*

Signature \_\_\_\_\_

Date \_\_\_\_\_