

Application #

Office of Code Enforcement, Licenses, Permits, and Inspections
6100 Jost Street, Fairmount Heights, MD 20743
(301) 925-8585

Application for Vacant Lot Registration

Address of the property for which the Registration is being sought:

Property Owner: _____ **Day Phone #** _____

Property Address: _____

If the Property is owned by a Corporation, **Name of Authorized Agent** _____

Agent's Day Phone # _____ **Agent's Position in Corporation** _____

Agent's Mailing Address: _____

1. If known date lot became vacant: _____

2. Attach a copy of your vacant lot plan.

REGISTRATION FEE:

(Make check payable to: Town of Fairmount Heights)
\$250.00 bi-annually

The fee shall be doubled if a period of vacancy exceeds two years for any reason.

*The Applicant hereby certifies that the information contained in this application is true and correct and that all applicable provisions of the Ordinances of Prince George's County and the Town of Fairmount Heights and State Laws will be complied with, whether specified herein or not.

Owner or Agent's name

Owner or Agent's signature and date