

City of St. Marys Fire Department

222 Indiana Avenue, St. Marys, OH 45885 (419) 394-2361 Email: dayers@cityofstmarys.net



VACANT BUILDING REGISTRATION

FOR OFFICE USE	
Registration Number	Date
Vacant Property Address	Parcel Identification Number

PROPERTY OWNER INFORMATION	
Owner #1	

Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ E-Mail: _____

Owner #2

Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ E-Mail: _____

Owner #3

Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ E-Mail: _____

****If there are more owners, please attach their information to the back of this application.***

LOCAL AGENT OR DESIGNEE INFORMATION
Agent, Manager, Caretaker, or Designee

Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ E-Mail: _____

[] Check if none

****If there are more local agents or designees, please attach their information to the back of this application***

LIEN HOLDERS
(or other parties known or believed upon to have a claim of ownership in the building)

Lien Holder #1

Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ E-Mail: _____

Lien Holder #2

Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ E-Mail: _____

Lien Holder #3

Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ E-Mail: _____

☐ Check if none

****If there are more owners, please attach their information to the back of this application.***

VACANT BUILDING PLAN
(please select one and attach to the back of this application)

☐ **Demolition**

If the building is to be demolished, a demolition plan indicating the proposed time frame for demolition which includes starting within 30 days of acceptance of the proposed demolition timeline and does not exceed one year in accordance with the Ohio Building Code. *(Note: Demo permit from Miami County Building Dept. is required.)*

☐ **Secured Structure**

If the building is to remain vacant, a plan for ensuring the building is secured in accordance with all applicable building and fire codes along with the procedure that will be used to maintain the property, and a statement of the reasons why the building will be left vacant (e.g., building for sale, etc.). A Knox Entry System and a vacant property hazard sign will be installed at a location to be determined by the Fire Chief or designee. *(Note: This does not exempt the structure from any applicable nuisance or zoning codes.)*

☐ **Rehabilitation**

If the building is to be returned to appropriate occupancy or use, rehabilitation plans for the building and grounds are required. The rehabilitation plan shall not exceed 12 months from the time permits are obtained, unless an extension is granted from the Zoning Board. Any repairs, improvements or alterations to the property must comply with any applicable codes and the property must remain properly secured with a Knox Entry System.

FEE SCHEDULE

The fees described in this section are structured to provide appropriate incentives for owners of vacant buildings to care for them properly, seek to fill them, and in appropriate cases, demolish them. The annually increased fee amounts are intended to absorb the costs for possible demolition, hazard abatement, or repairs to vacant buildings.

Commercial / Industrial	
Registration (Years 0-1)	\$400
1 st Renewal (Years 1-2)	\$800
2 nd Renewal (Years 2-3)	\$1600
3 rd Renewal (Years 3-4)	\$3200
Every Subsequent Renewal	\$6400

Residential	
Registration (Years 0-1)	\$250
1 st Renewal (Years 1-2)	\$500
2 nd Renewal (Years 2-3)	\$1000
3 rd Renewal (Years 3-4)	\$2000
Every Subsequent Renewal	\$4000

FOR OFFICE USE	
Registration Fee Total:	\$

Registration fees shall be paid at the Municipal Building and a copy of the receipt attached to the registration form.

**If the owner successfully restores the building to compliance with standards of the Ohio Building Code and re-occupied within one year of payment of the annual registration fee, the Fire Chief shall refund the registration fee for the year in which the building was approved for re-occupancy.*

APPLICANT SIGNATURE & AFFIDAVIT

I certify that I have the authority to file this application, have read the application in its entirety, and that all information and attachments are true and correct to the best of my knowledge. I have read and understand Chapter 1343 of the Codified Ordinances for owning vacant property in the City of St. Marys and agree to comply with these requirements. In accordance with this ordinance, I agree to notify any future owner of this vacant building registration.

Applicant Signature: _____ Date: _____

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