

# FORECLOSED OR VACANT PROPERTY REGISTRATION FORM

Review Local Government Instructions Before Completing



City of Auburn  
 P O Drawer 1059  
 1369 Fourth Ave.  
 Auburn, GA 30011  
 770-963-4002

<b>COUNTY:</b>	
<b>TAX PARCEL #:</b>	
<b>THIS PROPERTY IS CURRENTLY VACANT (y/n):</b>	
<b>IF THIS FORM IS SUBMITTED TO UPDATE A PRIOR REGISTRATION, THE COUNTY AND TAX ID# MUST BE ENTERED ABOVE, AND THE NEW INFORMATION INPUT BELOW— AND ENTER "YES" HERE:</b>	
<b>IF THIS PROPERTY HAS NOW BEEN RE-CONVEYED, Enter DATE:</b>	

## PROPERTY INFORMATION

<b>Street Address:</b>			
<b>City:</b>	<b>Zip Code:</b>		
<b>Conveyance Document:</b>	<b>Deed Book:</b>	<b>Page:</b>	

## AGENT INFORMATION (Agent for Property Owner)

<b>Agent Bus. Name:</b>			<b>No Bus. Name</b>
<b>First Name</b>	<b>Middle Name</b>	<b>Last Name</b>	<b>Suffix</b>
<b>Phone 1</b>	<b>Phone 2</b>	<b>Fax</b>	<b>Email</b>
<b>Street Add -No PO Box</b>	<b>Street</b>	<b>Unit#</b>	<b>City</b>
<b>Mail Address:</b>			<b>Zip</b>
<b>Street Address:</b>			

## PROPERTY OWNER INFORMATION (Owner, Lender, Mortgagee, or Creditor)

<b>Bus. Name:</b>			<b>Title:</b>	<b>No Bus. Name</b>
<b>First Name</b>	<b>Middle Name</b>	<b>Last Name</b>	<b>Suffix</b>	
<b>Phone 1</b>	<b>Phone 2</b>	<b>Fax</b>	<b>Email</b>	
<b>OWNER MAILING ADDRESS</b>			<b>OWNER STREET ADDRESS (no PO Box)</b>	
<b>CITY</b>			<b>CITY</b>	
<b>STATE/PROVINCE</b>			<b>STATE/PROVINCE</b>	
<b>COUNTRY</b>	<b>ZIP CODE</b>	<b>COUNTRY</b>	<b>ZIP CODE</b>	

## ACKNOWLEDGEMENTS

REGISTRANT ACKNOWLEDGES THAT ANY CHANGE TO THE ABOVE INFORMATION REGARDING THE PROPERTY, AGENT, OR OWNER MUST BE SUBMITTED WITHIN 30 DAYS OF THE CHANGE.

REGISTRANT HAS OBTAINED AND READ THE LOCAL GOVERNMENT'S INSTRUCTIONS PERTINENT TO THIS FORM.

<b>DATE THIS FORM SUBMITTED:</b>	<b>PRINT NAME:</b>
<b>SIGNATURE:</b>	<b>PHONE #:</b>
(Name entered here on electronic form acts as digital signature.)	