

## CITY OF ECORSE BUILDING DEPARTMENT VACANT BUILDING REGISTRATION FORM 3869 W Jefferson, Ecorse MI 48229

PH: (313) 386-3636

FOR OFFICE USE ONLY REG#:
Date Issued:
Expiration:



Owner(s) of Property:			
Name:			
Address:			
Home Phone:	Work Phone:	Email:	
Responsible Party of Prop	erty (if different than owner's infor	mation):	
Name:			
Address:			
Home Phone:	Work Phone:	Email:	
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