



**MUNICIPALITY OF ANCHORAGE  
DEVELOPMENT SERVICES DEPARTMENT  
BUILDING SAFETY DIVISION**



**VACANT AND ABANDONED BUILDINGS APPLICATION**

DATE: \_\_\_\_\_ PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

OWNER(S): \_\_\_\_\_

OWNER'S STREET ADDRESS: \_\_\_\_\_

OWNER'S MAILING ADDRESS: \_\_\_\_\_

EMAIL: \_\_\_\_\_

**REAL PROPERTY OWNER:**

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_ Email: \_\_\_\_\_

OWNER(S): \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

**PROPERTY LOCATION:**

STREET ADDRESS: \_\_\_\_\_

LOT \_\_\_\_\_ BLOCK \_\_\_\_\_ SUBDIVISION \_\_\_\_\_

TAX IDENTIFICATION: \_\_\_\_\_

INSURANCE COVERAGE:  YES  NO

BUILDING SECURE:  YES  NO DATE SECURED: \_\_\_\_\_

FEE PAID:  YES  NO

FIRST YEAR  SECOND YEAR  THIRD YEAR  + YEAR

SIGNATURE: \_\_\_\_\_