



Municipality of Anchorage  
Austin Quinn-Davidson, Acting Mayor

Real Estate Department, Real Estate Services: (907) 343-7525

### FORECLOSURE PROPERTY REGISTRATION

**Property Information:**

Parcel ID #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Street Number & Street Name

AK

City State Zip Code

Last Inspection Date: \_\_\_\_\_

Inspection Comments: \_\_\_\_\_

Occupied:  Yes If "Yes": Name & Phone: \_\_\_\_\_

No If "No", is the property boarded up or secure:  Yes  No

Utilities:  On  Off If "Off" Which utilities:  Water  Gas  Electricity

**Property Maintenance or Local Contact Info:**

Company Name: \_\_\_\_\_

Company Address: \_\_\_\_\_

Street Number & Street Name

City State Zip Code

Contact Person: \_\_\_\_\_

Contact Phone #: \_\_\_\_\_

Contact Email: \_\_\_\_\_ @ \_\_\_\_\_

**Mortgagee Information:**

Lender/Lienholder: \_\_\_\_\_ Registered Agent: \_\_\_\_\_

Mailing Address of Registered Agent: \_\_\_\_\_  
Street Number & Street Name

Phone # \_\_\_\_\_ City State Zip

**Fee Information:**

Per Anchorage Municipal Code § 15.05.170A, Mortgagees are required to report the commencement of foreclosure proceedings to the Municipality of Anchorage along with a one-time fee of \$200.

**Submitted By:**

Company: \_\_\_\_\_ Person Completing Form: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_ @ \_\_\_\_\_

I hereby certify that the information submitted in this form is an accurate representation of the facts on the date signed.

Signature

Date

Mail the completed form to: Real Estate Services Dept., Municipality of Anchorage, PO Box 196650, Anchorage, AK 99519-6650  
Make checks payable to Municipality of Anchorage