



**Vacant Building Registration & Renewal Form**

**City of Barre  
6 N. Main Street  
Barre, VT 05641**

**Phone: (802) 476-0245- or 477-1466**

This form is used to track vacant properties and inform the Public Safety Dept. of structures which are not occupied.

**Property Information: (\* required)**

<b>*Physical Address of Property:</b>	
<b>*Property Owner Name:</b>	<b>*Phone Number:</b>
<b>*Owners Mailing Address:</b>	
<b>*Owners Email Address:</b>	
<b>*Emergency Contact Name:</b> <small>(If different from owner)</small>	
<b>*Emergency Contact Phone:</b> <small>(If different from owner)</small>	<b>*Email Address:</b>
<b>*Property Maintenance Company:</b> <small>(Mailing address, City, State &amp; Zip Code)</small>	<b>*Phone Number &amp; Email Address:</b>

Describe measures to secure the property:

**\*The owner of a vacant building or structure shall immediately lock, barricade or secure all doors, windows and other openings in the building or structure to prohibit entry by unauthorized persons, in accordance with the vacant building maintenance standards of this ordinance. The owner of a vacant building or structure shall provide the police department with a list of persons authorized to be present in the building and shall provide notice authorizing the arrest for trespass of individuals not on the list. The owner shall update the authorized person list as needed.**

**\* The owner or Responsible Agent shall purchase and install an emergency access key-box approved by the Fire Department.**

**\* The property owner shall provide documented proof of liability insurance.**

**The below signed hereby attests that the information provided is accurate to the best of their knowledge**

**Signatures:**

Indicate if:  Property Owner  Agent for Owner

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Print Name: \_\_\_\_\_

**Staff Use Only Below:**

Is documented proof of liability insurance attached:  
 Yes  No

The above property meets the requirements of the Barre City Vacant Building Ordinance and the appropriate fees are attached

Administrator: \_\_\_\_\_ Date: \_\_\_\_\_

Fee period July 1 - December 31  Fee period January 1 - June 30