



BUILDING DEPARTMENT
TOWN OF STOUGHTON

10 Pearl Street
Stoughton, MA 02072

Thomas McGrath
Building Commissioner

Telephone: 781-344-6070
FAX: 781-232-9320

Vacant Properties: Registration and Maintenance

Vacant Property Address: _____

Name of Owner (In-State) _____

Home Telephone #: _____ Cell # _____

Address of Owner (No P.O. Box Permitted) Street: _____

City: _____ State: _____ Zip Code _____

Name of Owner (Corporation, Person, or Other Entity) Out of State

Name: _____

Home or Business Telephone # _____ Cell # _____

Address (No P.O. Box Permitted) Street _____

City: _____ State: _____ Zip Code _____

Out of State Owners/In State Authorized Agent

Name: _____

Home or Business Telephone # _____ Cell # _____

Address (No P.O. Box Permitted) Street _____

City: _____ State: _____ Zip Code _____

Certification By Owner That Property Is Vacant and Secured

Signature _____ Date _____

Name of local individual of property management company responsible for maintenance and security of property (if other than owner)

Name _____

Home or Business Telephone # _____ Cell # _____

Address (No P.O. Box Permitted) Street _____

City: _____ State: _____ Zip Code _____

Building Commissioner _____ Expiration Date _____

Filing Fee: \$50.00

Received on _____