



VACANT BUILDING REGISTRATION

Town of Clayton, P.O. Box 1130, Clayton, DE 19938

(302) 653-5637 Email: townofclayton@clayton.delaware.gov

The property owner of a habitually vacant building as determined by the Town's assessment records shall have 30 days from the date the building qualifies as a habitually vacant building to file a notarized registration statement which shall include the street address and parcel number of each such vacant building, the names and addresses of all owners, and any other information deemed necessary by the Town of Clayton to be in compliance with Ordinance Article 2.4.

Definitions

Vacant means a building or structure shall be deemed vacant if no person or persons actually currently conducts a lawfully licensed business, or lawfully resides or lives in any part of the building as the legal or equitable owner(s) or tenant-occupant(s), or owner-occupant(s), or tenants on a permanent non-transient basis.

Vacant Building habitually means any building, whether residential or non-residential, that has been vacant for more than 90 consecutive days.

Who is Required to Register?

Any owner who has abandoned or intends to abandon real property shall register the property with the Town. The registration fee will be waived within 30 days of a building qualifying as a habitually vacant building, but it shall not be waived if the Town mails notice to the property owner of the need to file the registration statement.

Filing Fees

\$500 – initial registration fee. This will be waived for all property owners who file within 30 days of a building qualifying as a habitually vacant building but shall not be waived if the Town mails notice to the property owner.

\$500 – Building has been vacant one to two years.

\$1,000 – Building has been vacant for three, four, or five years.

\$2,000 – Building has been vacant for six, seven, eight, nine, and ten years. There will be an additional **\$500** fee for each year more than ten years.

Property Owner Information

Vacant Property Address _____

Tax Parcel ID _____ ☐ Residential ☐ Commercial

Property Owner _____

Mailing Address _____

Phone _____ Email _____

Property Manager / Company _____

Phone / Email _____

Signature _____ Date _____

Office Use Only

Date Received _____

Reviewed By _____

Accepted / Denied _____