



BUILDING OWNER'S REGISTRY AFFIRMATION

As per Section 90-20 of the Code of City of Rochester, I, _____, am providing the City of Rochester with the mandated contact information for the properties I own. I understand that should any of this information change I must notify the City within ten (10) days of the change.

Please note the following:

- All one and two family owner occupied homes, Government Buildings, Hospitals, Schools, and Commercial or Industrial Buildings with twenty-four (24) hour operations and/or security are exempt from this requirement.
- A Post Office Box will not be accepted as a street address.
- For any property that is required to have a Certificate of Occupancy the name of both the owner and property maintenance point of contact must be supplied. If the owner resides outside of the 13 or 14 zip code areas they must designate someone else who resides within Monroe County as their point of contact. The owner and/or any necessary property maintenance point of contact must be a natural person.
- Pursuant to §90-20E(5), All notices of violation and other service of process upon an owner, if mailed, shall continue to be mailed to the owner's tax mailing address if such address has been provided by the owner to the City.

OWNER SIGNATURE: _____ **EFFECTIVE DATE:** _____

False statements made herein are punishable by a Class A Misdemeanor pursuant to the NYS Penal Law.

PROPERTY MAINTENANCE CONTACT

NAME (Must be a person): _____
ADDRESS (Cannot be a PO Box): _____
CITY, STATE: _____ ZIP: _____
BUSINESS PHONE: _____

OWNER

NAME (Must be a person): _____
ADDRESS: _____
CITY, STATE: _____ ZIP: _____
BUSINESS PHONE: _____

Business phone numbers will be made available to the public.

PROPERTIES AFFECTED:

1. _____
2. _____
3. _____
4. _____
5. _____

Please attach additional sheets if necessary.