



Village of Forestville

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**REGISTRATION OF
RESIDENTIAL PROPERTY IN FORECLOSURE
FORESTVILLE ORDINANCE 50-2.4**

Property Address: _____

Last Known Owner: _____

Last Known Owner's Address: _____

Last Known Owner's Telephone: _____ Email : _____

Foreclosure Commencement Date: _____ Docket # : _____

Bank/Lender or Financial Institution: _____

Address: _____

Mailing Address (if different): _____

Telephone: _____ Contact Person: _____

Local Property Manager: _____

Address: _____ Telephone: _____

Agent or Servicing Company Authorized to Conduct Repairs/Maintenance:

Description of the Existing Condition of the Property (Attach additional sheet if necessary):

Is the structure on the property unsecured? Yes _____ No _____