



REGISTRATION OF ABANDONED REAL PROPERTY

MAITLAND
FLORIDA

Date / / 20

ADDRESS OF PROPERTY IN FORECLOSURE: _____

RECORD TITLE OWNER OF PROPERTY: _____

NAME OF MORTGAGEE: _____

MORTGAGEE'S MAILING ADDRESS: _____

NAME OF CONTACT PERSON FOR MORTGAGEE: _____

PHONE NUMBER OF CONTACT
PERSON FOR MORTGAGEE: _____

FAX NUMBER OF CONTACT
PERSON FOR MORTGAGEE: _____

EMAIL ADDRESS OF CONTACT
PERSON FOR MORTGAGEE: _____

NAME OF THE LOCAL PROPERTY MANAGEMENT
COMPANY RESPONSIBLE FOR THE
SECURITY AND MAINTENANCE
OF THE PROPERTY: _____

CONTACT PERSON FOR THE LOCAL
MANAGEMENT COMPANY: _____

PHONE NUMBER OF CONTACT
PERSON FOR THE LOCAL MANAGEMENT
COMPANY: _____

FAX NUMBER OF LOCAL CONTACT
PERSON FOR LOCAL MANAGEMENT
COMPANY: _____

EMAIL ADDRESS OF CONTACT
PERSON FOR LOCAL MANAGEMENT
COMPANY: _____

*Please fill out and return this form with \$150.00 registration fee payable to "City of Maitland"
Send to: Andy Arcaya, Code Enforcement Specialist
City of Maitland, 1776 Independence Lane, Maitland FL 32751
Office: 407-539-6154 Fax: 407-539-6275 Email: aarcaya@itsmymaitland.com*