



**CITY OF SOUTH EUCLID
HOUSING DEPARTMENT
1349 South Green Road
South Euclid, Ohio 44121
216-381-0400**

**VACANT BUILDING ORDINANCE
Assumption of Violations Form
Effective March 22, 2010
Ordinance 11-10**

NOTARIZED STATEMENT OF ASSUMPTION OF HOUSING VIOLATIONS

Property Address: _____ **PP#** ____ - ____ - _____

In accordance with Chapter 1414: *Registration of Vacant Buildings and Certificate of Occupancy for Vacant Buildings*, of The City of South Euclid *Codified Ordinances*:

I _____
print your name clearly

residing at _____
print your current address phone no.

being the purchaser of the above captioned property, do hereby agree to assume all remaining violation(s) as stated on the Point of Sale inspection report.

This will be an: owner occupied rental property

I hereby acknowledge that I am aware of the remaining violations and accept the responsibility of correcting them to the satisfaction of the South Euclid Building and Housing Department. By accepting responsibility for these violation(s), I understand that all violation(s) must be corrected within **SIX MONTHS (6 months)** from the date the title is transferred. If any violations are deemed by the Building Department to be a threat to the health, safety or public welfare I understand that those violations must be corrected prior to my occupancy.

In order to secure the performance of the satisfactory correction of all violations, I have established an escrow account in the amount of \$ _____, with the following:

Escrow Holding Company: _____

Escrow Agent's Name: _____

Address: _____

City, State, Zip: _____

Phone No: _____ Escrow Account/Reference Number: _____

Escrow funds are designated to be released to: _____

A written statement, from the holding company, acknowledging that an independent escrow agent is holding sufficient funds, must be submitted to the Building Department prior to the issuance of a Certificate

NOTARIZED STATEMENT OF ASSUMPTION OF HOUSING VIOLATIONS

PROPERTY ADDRESS: _____
(address)

* Additionally, a condition/term of the escrow account is that no monies may be disbursed or removed there from, and the account may not be closed, until the violations have been corrected and without the written authority and approval of the South Euclid Building and Housing Department.

I affirm that this statement is correct and agree to all the terms of Chapter 1414 of the South Euclid Codified Ordinance.

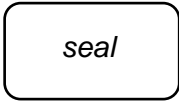
Signatures(s) of Person(s) Assuming Violations

Date

NOTARY (signature)

Date

My Commission Expires _____



** This original form must be signed, notarized and returned to the City of South Euclid Building and Housing Department prior to title transfer.*