

City of Hillsdale
97 North Broad Street
Hillsdale, Michigan 49242
(517) 437-6445 or Fax: (517) 437-6448



Acceptance of Responsibility

Property Address: _____

Date of Property Transfer: _____

- Compliance order/notice of violation attached
- Proof of transfer of ownership attached (deed, land contract, lease, etc...)

Pursuant to the 2012 International Property Maintenance Code as adopted by the City of Hillsdale, Section 107.6, the undersigned grantee(s), transferee(s), mortgagee(s) or lessee(s) of the property indicated hereby acknowledge receipt of the attached compliance order or notice of violation issued by City of Hillsdale Code Official regarding the described property. I/we hereby accept full and total responsibility without condition for making the required corrections. I/we understand that I/we will be required to schedule a re-inspection of the above property with the City of Hillsdale Code Enforcement Office prior to the stated deadline for the purpose of verifying correction of noted repairs and/or deficiencies. Any request for additional time to complete the cited corrections or repairs shall be made in writing pursuant to Sections 107.6.1 and 107.6.2 of the Property Maintenance Code. I/we further understand that a valid Use and Occupancy permit is required by the City of Hillsdale Municipal Code Section 6-63 for the use and occupancy of any structure or portion of any structure located within the City. An approved inspection under the Property Maintenance Code by the Code Official or his designee is required prior to the issuance of said permit. Permits are valid until there is a change of occupants that occurs two years or more following the issuance of the permit.

Must have approval by code enforcement prior to closing. (See page 2)

Witnesses:

Transferee Signature(s)

State of Michigan

ss: County of _____

On _____, before me, a Notary Public in and for said County, personally appeared _____, to me known to the same person(s) described in and who executed the within instrument, who has/have acknowledged the same to be his/her/their free act and deed.

_____, Notary Public
_____, County, Michigan

My commission Expires: _____

Acting in the county of _____

OVER

Please include projected completion dates for each item below:

DESCRIPTION OF SPECIFIC REPAIRS/IMPROVEMENTS	PROJECTED BEGIN DATE	PROJECTED END DATE

<p>OFFICE USE ONLY:</p> <p>Date approved _____ Approved by _____</p> <p>Approved deadline date _____</p>
