

*****NOTICE OF INTENT*****

PROPERTY OWNER NAME

Parcels listed on back of Notice

PLEASE CHECK ONE OF THE THREE OPTIONS BELOW, SIGN, AND RETURN.

Option 1: I will be responsible for maintaining my property in accordance with the Standards of Maintenance of Vacant Parcels. **(Recurrent nuisances must be abated on a year-round basis.)**

Option 2: I wish to have my property included in the City work program, please sign this notice - see below.

I realize I will be billed for any work done, which will include an administrative charge, the cost of postage, and any abatement costs associated with the parcel. I understand it will become a lien against my property, if not paid.

Option 3: I no longer own this property. The property was sold on:

_____ to: _____
Month Day Year Buyer's Name (please print)

Buyer's Address (if different from above)

Buyer's (Area Code) Phone Number

Your Signature/Info Area:

Signature

Name (please print)

Your Address (if different from above)

Your (Area Code) Phone Number

PLEASE RETURN THIS FORM TO:

Public Services Department
4081 Alvis Court
Rocklin, CA 95677

Phone: (916) 625-5500

Fax: (916) 625-5501

Public Services Department