

# City of Winnsboro

## Vacant Building Program

### Requirements, Regulations and Information

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The Council of the City of Winnsboro has adopted ordinances regulating vacant and unoccupied structures.

You must register this building with the City, Vacant/Nuisance Buildings Code Enforcement Unit if the building is unoccupied and:

1. Unsecured, or
2. Secured by other than normal means (boarded), or
3. A dangerous structure, or
4. Condemned as uninhabitable, or
5. Condemned or Vacated by Fire Marshal Certificate of Occupancy Program, or
6. Has multiple housing or Building Code violations, or
7. Is condemned and illegally occupied, or
8. Has been unoccupied for a period of time longer than one year during which time the Enforcement Officer has issued an order to correct nuisance conditions.

#### Registration Requirements:

1. Submit the enclosed Vacant Building Registration Form within 30 days, describing plans for rehabilitating and reoccupying or demolishing the
2. Disclose all pertinent ownership information.
3. Disclose all pertinent lien-holders.
4. Disclose any current Truth-in-Sale of Housing Disclosure Reports.
5. Pay the \$1,100.00 annual Vacant Building Registration fee within 30 days of receiving this letter. If the registration fee is not received within  
*NOTE: If the building is vacant due to a fire, you may have a 90 day exemption from the registration fee. You must still submit the enclosed Vacant Building Registration Form within 30 days informing us of your plans for the building to qualify for this exemption. At the end of 90 days your rehabilitation must be complete OR you must pay the \$1,100.00 registration fee.*
6. Provide unencumbered access to all portions of the premises of the buildings to permit the Enforcement Officer to make a complete inspection.

Owners, agents, assignees and all responsible parties are required to comply with the following requirements of the Saint Paul Legislative Code:

1. Keep all buildings secure.
2. Keep all porches, stairs, and exterior premises free of refuse, junk and debris.
3. Cut grass and weeds.
4. Remove snow and ice from sidewalks.

Sale Requirements – Contact the Code Enforcement, 903.342.3654, for full details. There is a fee of \$\_\_\_\_\_.00 for the Sale Review Process.

VB1 – Current registration and fees; notify the City; restore utilities.

VB2 – No sale without City approval. Requirements include: current registration and fee payments, code compliance report, cost estimate for all repairs, a schedule for completion of the repairs, and proof of financial capability to complete all repairs.

VB3 – No sale without a Certificate of Code Compliance or Certificate of Occupancy

**City of Winnsboro  
Vacant Building Registration Form**

Address of Property: \_\_\_\_\_

Date: \_\_\_\_\_

Planned disposition of this building (please check one):

- I plan to rehabilitate this structure commencing (date): \_\_\_\_/\_\_\_\_/\_\_\_\_
- I plan to demolish (wreck and remove) this building by (date): \_\_\_\_/\_\_\_\_/\_\_\_\_
- I am willing to authorize the City of Winnsboro to demolish and remove this building(s).
- This building is vacant as a result of fire damage which occurred on (date): \_\_\_\_/\_\_\_\_/\_\_\_\_.

*I, as the property owner, want to claim registration and fee exemption status for ninety (90) days from the date of the fire. I intend to repair and reoccupy the building.*

Other: \_\_\_\_\_

Persons who will be responsible for compliance with the requirements of ordinance:

NAME	ADDRESS	PHONE NO.	PHONE NO.

Persons, lien holders, mortgagees, mortgagors and other interested parties known to me:

NAME	ADDRESS	PHONE NO.	PHONE NO.

<p><b>Print</b> Your Name (legibly) _____</p> <p>Signature _____ Date of Birth _____</p> <p>Address _____</p> <p>City _____ State _____ Zip _____</p> <p>Main phone # _____ Alternate phone # _____</p> <p>Email address _____</p>	<p align="center"><b>INSTRUCTIONS:</b></p> <p align="center"><i>Complete and return this form with your registration fee payment of \$ Credit cards are accepted or Make checks payable to : City of Winnsboro</i></p> <p align="center"><i>Make Payment at, or mail payment to: City of Winnsboro 501 S. Main St. Winnsboro, Texas 75494</i></p> <p align="center"><i>Thank you for your cooperation</i></p>
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**City of Winnsboro  
Vacant Building Registration Form**

Date: \_\_\_\_\_

Property Address: \_\_\_\_\_

Legal Description of Property: \_\_\_\_\_

\_\_\_\_\_

**Contact Information of Ownership Interest in Property**

Name: \_\_\_\_\_

Physical Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone #: (     )     -     Alt. Phone #: (     )     -

S.S. # or \_\_\_\_\_

F.I.D. #: \_\_\_\_\_

E-Mail: \_\_\_\_\_

**Contact Information of LOCAL Property Manager or Agent**

Name: \_\_\_\_\_

Physical Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone #: (     )     -     Alt. Phone #: (     )     -

E-Mail: \_\_\_\_\_

***The undersigned hereby attests to the above information as accurate. Any falsification may result in the denial or revocation of the certificate of registration for a vacant building.***

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# City of Winnsboro

## Vacant Building Plan of Action Form

### Utility Information

Water: \_\_\_\_\_ ON or \_\_\_\_\_ OFF

Electricity: \_\_\_\_\_ ON or \_\_\_\_\_ OFF

Gas: \_\_\_\_\_ ON or \_\_\_\_\_ OFF

Winterized: \_\_\_\_\_ YES or \_\_\_\_\_ NO

Last Date of Occupancy: \_\_\_\_\_

Total Vacant Square Footage: \_\_\_\_\_

### PLAN OF ACTION

Plan to rehabilitate/correct violations of this structure commencing (date): \_\_\_\_\_  
*Provide a detailed timeline for correcting all violations and a plan to meet the minimum standard of care for vacant properties as outlined in Section 12-6 of Winnsboro's City Code.*

Identify the measures that will be taken to maintain the property while it is vacant.

Provide a detailed plan for how the vacant building will be rehabilitated and identify a future use for the property.

### REQUIRED ATTACHMENTS

Proof of insurance of the building which shall be kept in full force and effect at all times during the registration term, commercial general liability and property insurance coverage, with minimum combined bodily injury (including death) and property damage limits of not less than \$1,000,000 for each occurrence and \$2,000,000 annual aggregate.

A complete floor plan of the property for use by first responders in the event of a fire or other catastrophic event.

Photo or visual proof that "No Trespass" placards have been placed on the premises.

### REGISTRATION & INSPECTION FEES

A check or a Request for a Qualified Fee Waiver must be submitted with this application. Please make checks payable to City of Winnsboro.

**Registration & Inspection Fee: \$500.00**

Check #: \_\_\_\_\_ Received by: \_\_\_\_\_ Date: \_\_\_\_\_

Request for a Qualified Fee Waiver Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

**A Plan of Action must be updated every 6 months.**

# City of Winnsboro

## Request for a Qualified Fee Waiver

The following fee waivers may be applied to your registration if you meet one or more of these qualification. Please check the fee waiver that you would like to apply for and attach any pertinent documentation to this registration form as evidence for the waiver.

Property has been devastated by a catastrophe such as a fire or flood within the past 30 days. Date: \_\_\_\_\_

Property owner who is indigent.

Property owner is deceased or is no longer legally competent. Date: \_\_\_\_\_

Property owner has obtained a building permit and is progressing in an expedient manner to prepare the premises for occupancy.

***The undersigned hereby attests to the above information as accurate. Any falsification may result in the denial or revocation of the certificate of registration for a vacant building.***

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### City Administrator Approval for Waiver

Qualified for Fee Waiver

NOT - Qualified for Fee Waiver

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

All fee waivers must be applied for, using the forms provided, on an annual basis, and are subject to approval by the City Administrator. A fee waiver is only valid for twelve (12) months.