



CODE COMPLIANCE

240 Columbus Avenue
Sandusky, Ohio 44870
419.627.5913
www.cityofsandusky.com

RESIDENTIAL VACANT & FORECLOSED PROPERTY BOND RELEASE FORM

tparker@cityofsandusky.com

OFFICE USE ONLY

Date Request Received: _____

Balance Issued Date: _____

Check #: _____

Amount to Release: _____

City Official Sign Off: _____

Date of City Sign Off: _____

Account # - 894-0000-53000

Section 1 - PROPERTY INFORMATION:

Address: _____ Parcel Number: _____

Type of property: Single-family Duplex Tri-plex Multi-family (4+ Units) Commercial Rooming House

Section 2 – MORTGAGEE / BANK / LENDER / SERVICER INFORMATION:

Name of entity: _____ Phone #: _____

Address: _____ City: _____ State: _____ Zip: _____

BOND RELEASE JUSTIFICATION (SELECT ONE)

Section 3 – SALE INFORMATION (IF APPLICABLE):

New Owner's Name: _____

New Owner's Address: _____ Transfer Date: _____

New Owner Phone: _____

Section 4 – FORECLOSURE DISMISSAL (IF APPLICABLE):

Case Number: _____ Dismissal Date: _____

Section 5 – SERVICER TRANSFER (IF APPLICABLE):

Transfer Date: _____	New Servicer Name: _____
New Servicer Address: _____	
Contact Person Name: _____	Contact Person Phone: _____

Section 6 – BOND INFORMATION:

Bond Paid by Check #: _____	Date of Check: _____
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Section 7 – BOND RELEASE INFORMATION:

Payee Name: _____	
Payee Address: _____	
Contact Person for Payee Name: _____	Phone: _____

CERTIFICATION

I certify that the information contained in this bond release form is true and accurate to the best of my knowledge.

Applicant Signature

Applicant Printed Name

Date