



Mayor Joshua A. Garcia
City of Holyoke

Timothy M. Rivers
Director Board of Health

**City of Holyoke Board of Health
Vacant Building Registration Appeal Form**

Pursuant to City of Holyoke Code of Ordinances 18-35, an owner assessed a vacant building registration fee may appeal the City's determination of vacancy by filing an appeal in writing within fifteen (15) calendar days of the mailing of the Vacant Building Registration notice and billing statement. City Ordinance limits the scope of appeal the sole issues of whether the building is vacant and/or how long the building has been vacant.

In accordance with city ordinance, the owner has the burden of proof on appeal to demonstrate the property is not vacant. Accordingly, you may include with this appeal any written narrative or documentation which may support your claim (e.g., photographs, certificates of occupancy, licenses, recent utility bills, inspection reports).

To submit the appeal, fill-out the below form and return to the Holyoke Board of Health at 20 Korean Veterans Plaza, City Hall Annex, Room 306, Holyoke, MA 01040.

Date of Appeal: _____

Property Address: _____, Holyoke, MA

Building Type: Residential (1-3 Units) Residential (4+ Units)
 Commercial

Building Use: _____

Owner Name: _____

Owner Phone: _____ **Owner Email:** _____

Basis for Appeal (select all that apply):

- Lawful residential habitation (Beginning Date of Occupancy: _____)
- Lawfully licensed business (Beginning Date of Occupancy: _____)
- Duration of vacancy (Beginning Date of Vacancy: _____)

You will be notified of the hearing date for your appeal within thirty (30) days of the receipt of your appeal.

DO NOT WRITE BELOW - BOARD OF HEALTH USE ONLY

Hearing Date: _____

Decision (Yes No Abstain/Absent)

Vacant for _____ years

Vacant for _____ years, but active rehabilitation plan approved on _____

Not Vacant: Reason: _____