



NOTIFICATION OF VACANT AND/OR ABANDONED PROPERTY LOCAL AGENT FORM

TO BE COMPLETED AND SIGNED BY THE LOCAL AGENT:

The Local Agent is responsible for repair and maintenance and must reside or have a place of business within the State of Rhode Island.
Property Address:
Company Name:
Contact Person:
Company Address:
Telephone Number:
Email Address:

I acknowledge that as the local agent, I will be responsible to ensure that any and all required repairs and maintenance are completed, in accordance with all applicable local ordinances, rules and regulations and state statutes.

Signature: _____ **Date:** _____