



STATEMENT OF ASSUMPTION OF VIOLATIONS

Housing Department
City of University Heights

Please Print

Address of the Property in University Heights

To the Housing Director:

In accordance with Ordinance 89-10, Section 2 of the Housing Code of the City of University Heights; I **(print names of buyers)**

_____, being the buyer(s) of the above captioned property, do hereby agree to assume all remaining violation(s) at that property.

I hereby acknowledge that I am aware of what violations remain and accept the responsibility of correcting them. I also understand that inspection by the City does not guarantee that all property defects and/or code violations have been discovered, and I hereby hold the City of University Heights harmless from all acts or omissions. By accepting responsibility for these violation(s), I understand that all violation(s) must be corrected in THIRTY DAYS (30 days) after the signing date of this statement, or I will complete an extension request form, available at the Housing Department.

I have provided evidence which states that there is an escrow account with sufficient funds to cover the cost of repairs for existing violations. (If the amount of funds being held is \$5,000.00 or less, all funds will be released when a clear inspection is performed. In instances when more than \$5,000.00 must be held, one partial release may be authorized by the Housing Department when significant progress is shown.) I understand that the release of these funds is subject to the authority of the University Heights Housing Department.

Buyer's Current Mailing Address*: _____
***NO P.O. BOXES** (Please Print) Street City/State/Zip

Buyer's Home #: _____ Office/Cell #: _____

Please indicate if this property will be owner-occupied: **(please check one)** ☐ Yes ☐ No

I affirm that this statement is correct and agree to the terms and requirements.

Signature(s) of buyer(s) Date

Printed Name(s) of Buyer(s): _____