

Planning & Zoning Department
255 South Lincoln Avenue
O'Fallon, IL 62269
Phone: 618-624-4500 Ext. 4
Fax: 618-624-4534



"AS IS" Form for Buyer

Date: _____

I, _____ am purchasing the property located at

_____ "AS IS." I understand that as the new owner of the property, I am assuming the responsibility for obtaining the City's Occupancy Permit and complying with all requirements as stated in the City of O'Fallon's Property Maintenance Code.

Printed Name

Mailing Address

City, State, Zip

Phone Number

Signature

State of Illinois
County of St. Clair

This instrument was acknowledged before me on _____.

Notary Public