



**Civic League  
Derelict Structure Identification Form**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Name of Civic League you represent: \_\_\_\_\_

Your Title: \_\_\_\_\_

Please list the properties your civic league has identified as possible derelict structures:

Property Address:  Description:
Property Address:  Description:
Property Address:  Description:
Property Address:  Description:
Property Address:  Description:

**Please mail to:** Department of Neighborhood Preservation  
Director's Office/Derelict Structures  
400 Granby Street  
Norfolk, VA 23510