

DATE OF FORM: \_\_\_\_\_

Change of:  Ownership  
 Address

### INSTRUCTIONS

- Use this form to report a change in ownership (including a net lessee), managing agent and/or address
- For a change in ownership, attach a certified copy of the deed
- For a change in net lessee, attach a copy of the new net lease

### Building Information

House No(s) \_\_\_\_\_ Street Name \_\_\_\_\_

Borough \_\_\_\_\_ IMD No. \_\_\_\_\_ Alt. Application No. \_\_\_\_\_

### New Owner Information

Effective date of the change of ownership or other information: \_\_\_\_\_

Name: \_\_\_\_\_

Title (if representative): \_\_\_\_\_

Daytime Phone Number: \_\_\_\_\_

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

Business Address: \_\_\_\_\_

Home Address: \_\_\_\_\_

### 24 Hour Emergency Contact Information

*(must be over 21 years of age and reside within or regularly do business in New York City)*

Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

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

### Type of Ownership *(select one)*

Partnership

Corporate Partnership

Corporate Lessee

Corporation

Individual

If the owner is a corporation, complete this section.

Officers of Corporation			
NAME	ADDRESS	PHONE NUMBER	
<b>PRESIDENT</b>	BUSINESS	(    )	
	HOME	(    )	
<b>VICE PRESIDENT</b>	BUSINESS	(    )	
	HOME	(    )	
<b>SECRETARY</b>	BUSINESS	(    )	
	HOME	(    )	
<b>TREASURER</b>	BUSINESS	(    )	
	HOME	(    )	
MANAGING AGENT ( <i>natural person ONLY</i> )		PHONE NUMBER	TAX ID NUMBER
BUSINESS ADDRESS		(    )	
HOME ADDRESS		(    )	
EMAIL			

I consent to the designation as **Managing Agent** of the above premises.

\_\_\_\_\_  
Signature of Managing Agent

\_\_\_\_\_  
Date

**TO THE OWNER:** If the entire building is leased, give Lessee's name and address. **OR** If the net lessee is a corporate entity, give the entity's name, address and Tax ID number.

NET LESSEE	PHONE NUMBER	TAX ID NUMBER
BUSINESS ADDRESS	(    )	
HOME ADDRESS	(    )	
EMAIL		

I verify or affirm under the penalties provided by law, including fines and/or imprisonment, that all statements made herein are true and correct.

\_\_\_\_\_  
Name of Signatory (print)

\_\_\_\_\_  
Signature of Owner, Corporate Officer, or Lessee

\_\_\_\_\_  
Date

**NOTE: False statements may subject you to the penalties provided by law, including fines and/or imprisonment.**