



OTICE OF RENTAL	PROPERTY	TRANSFER
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Tenant Name:				
Unit Address:		City	State	Zip
Current Landlord:				
NEW LANDLORD				
Name:				
Mailing Address:				
Telephone Number (with	area code):			
Copy of deed or sCopy of manager Upon receipt of this notice	Information – W-9 Tax ettlement papers (stament agreement if there, an assignment of least	nped by Court) if per has only been a coase/contract form value.	roperty has been change of manag will be prepared a	sold; and/or ement and sent to
both current and new land the 20 th of the mon	_			•
Previous Landlord Signat	ure:			
New Landlord Signature:				
Please return form to:	Section 8 Owner Liai Macon-Bibb Housing PO Box 4928 Macon GA 31208-49 cscott@maconhousi	g Authority 28	x form to: (478)	752-5188

Questions? Call Christy Scott, Owner Liaison (478)752-5055