



Transfer of Ownership

Address of Property Purchased:

Previous Owner's Name:

Date of Purchase: _____

Your Information:

Name: _____

Mailing Address:

Phone Numbers:

_____ Home Fax Number: _____

_____ Cell

_____ Work

Email Address:

Preferred Method of Contact: _____ Email _____ Fax **(Please check one)**

Signature of New Owner:

Date

The following must accompany this form:

1. W-9 Request for Taxpayer Identification Number and Certification (attached)
2. Copy of Closing/ Settlement Statement or a certified copy or copy of the deed with an Affidavit of Ownership.