

- CHANGE OF OWNERSHIP
- OR -
- CHANGE OF BUILDING/SITE NAME
- OR -
- CHANGE IN MAILING ADDRESS

Be Sure to sign and date this form.

CHANGE OF OWNERSHIP CHANGE IN BUILDING/SITE NAME CHANGE IN MAILING ADDRESS

OWNER	Owner Name (individual, Partnership, Corporation)	Owner City, State, Zip		
	Owner Street Address			Phone

SITE	Site Name (individual, Partnership, Corporation)	Site City, State, Zip		
	Site Street Address	County	Phone	
	Type of Facility (i.e., School, Church, Office Building, etc.)			

*** PLEASE ENTER MAILING ADDRESS BELOW ***

MAIL	Mail Name (individual, Partnership, Corporation)	Mail City			
	Mail Street Address	County	State	Zip	Mail Location Phone
Owner / Lessee Representative Name		Title			Rep Phone

The changes made above applies to the following unit registration numbers: (example: MT1234)

Please double check to be sure you include ALL UNITS at this particular site. For multiple sites, please use multiple forms. Thank you.

Signature of Owner or

Lessee: _____ **Date:** _____