

HISTORIC RESIDENCE INFORMATION
(Complete this side **ONLY** if there are any changes)
Please legibly print the below sections

_____ Township
Property Index Number

PROPERTY ADDRESS: _____

CITY/TOWN: _____ ZIP: _____

Provide the information and documentation requested below if applicable to the property described by the Property Index Number above.

OWNERSHIP CHANGE:

In addition to the information below, submit documentation of transfer.

Property sold by: _____ Phone (_____) _____
(Daytime)

Property sold to: _____ Phone (_____) _____
(Daytime)

Address: _____

City/Town: _____ State _____ Zip Code: _____

Date of Transfer: _____

USE OR OCCUPANCY CHANGE:

Please describe below any change in use or occupancy.

Date of Change: _____

LEASE INFORMATION

In addition to the information below, submit a copy of the lease or memorandum of agreement.

Lessor: _____ Phone: (_____) _____
(Daytime)

Lessee: _____ Phone: (_____) _____
(Daytime)

Address: _____

City/Town: _____ State _____ Zip Code: _____

Commencement date of Lease or Agreement: _____

Expiration date of Lease or Agreement: _____