

## notification of change in contact information

CHFA requests that multifamily project owners report to Asset Management any changes in contact information, including the property management agent, within 30 days of the change.

Project Name				
Address				
City	State	Zip		
Loan Number (if applicable)	I			
Please be advised that the contact information will be effective on		changed/is changing. The change	• was/	
management agent and mana	agement agent contac	t		
Management Agent Company Name				
Management Agent Company Mailing Addres	S			
City	State	Zip		
Management Agent Taxpayer Identification N	umber	'		
Contact Name				
Contact Phone	Contact Email	Contact Email		
site contact				
Site Contact Name				
Site Contact Mailing Address				
City	State	Zip		
Site Contact Phone	Site Contact Ema	Site Contact Email		

owner contact				
Owner Name				
Owner Mailing Address				
City	State	Zip		
Owner Taxpayer Identification Number				
Owner Contact Name				
Owner Contact Phone	Owner Contact Email			
	1			
investor/limited partner contact				
Investor/LP Contact Name				
Investor/LP Contact Mailing Address				
City	State	Zip		
Investor/LP Contact Phone	Investor/LP Contact Email			
	1			
owner signature				
Signature		Date		
Print Name				