



# WASHINGTON COUNTY

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## OREGON

### Notice of Change in Management Agent Compliance Monitoring

Submit form prior to the effective date of the change in management agent.

Send completed form to:  
Ann Hawkins – Housing and Community Development Specialist  
[Ann\\_Hawkins@co.washington.or.us](mailto:Ann_Hawkins@co.washington.or.us)

Property Name:	
Property Address	
City and Zip:	

**Indicate Type of Change and Effective Date:**

Type of Change <i>(check all that apply)</i>	Effective Date	Comments
<input type="checkbox"/> Change in Management Agent		
<input type="checkbox"/> Change in Contact		

**Previous Management Company:**

Previous Mgmt Company Name:	
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**Company Information:**

New/Current Mgmt Company Name:	
Company Contact Name:	
Title:	
Company Street Address:	
City, State, Zip:	
Phone #:	
Fax:	
Email:	
On-Site Contact Name:	
On-Site Contact Email:	

**Contact Information if different from above:**

Street Address:	
City, State, Zip:	
Phone #	
Fax:	
Email:	

**If form is for a management company change, then the form must be signed by the managing general partner of the development. If the form is for a contact change, then it can be signed by an authorized representative of the management company.**

Signature of Authorized Representative: \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_\_

Print name of person signing: \_\_\_\_\_