



Leasing Operations

675 W. Main St.
Rochester, NY 14611
Phone: 585 697 6105
Fax: 585 697 6104

**OWNER/ AGENT
CHANGE OF ADDRESS FORM**

Name: _____

Federal Tax ID#: _____

Telephone: (_____) _____ email: _____@_____

I, _____, am hereby requesting the following information to be changed on my file:

Former Address: _____

New Address: _____

Signature: _____

Date: _____

