

Mail To:

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LANDLORD/TE	NAN	NT REPORTI	NG				
This report must be con If a forwarding address in/move-out and Semi A. This is a fill-in form. Save	nplete is unk Annua	d in full and be signown, place an N lly (January 1/July	gned and dated, a A in the column. y 1). The semi-anı	Reports are dunual report is a	ue within 30 day 12 month look	ys of any move- back period.	
Tax Department.			ŗ		Move Out Rep	nort 🗍	
REPORTING PERIOD (_	∕love In Report ¬		·		
Jan 1-June 30 S	Semi <i>A</i>	Annual Report	July 1-De	ecember 31 S	emi-Annual Re	port	
			PROPERTY	OWNER			
SSN/EIN							
PROPERTY OWNER NAME:							
PROPERTY OWNER							
ADDRESS: PROPERTY OWNER PHONE:							
PROPERTY OWNER PH							_
. NOI ENTI O WINEIN EIV	., VI L.						
			PHONE	MOVE IN	MOVE OUT	FORWARDING	
TENANT NAME		ADDRESS	NUMBER	DATE	DAT	ADDRESS	
					+		
						1	
SIGNATURE OF PROPE	RTY O	WNER:					
DATE:							