



777 Cypress Avenue, Redding, CA 96001-2718

P.O. Box 496071, Redding, CA 96049-6071

FAX 530.225-4126 TDD 530. 225.4363

Main Line 530.225.4048

**Landlord: TRANSFER OF PROPERTY MANAGEMENT**  
Redding Housing Authority Rent Subsidy Program

I certify that I manage the property at \_\_\_\_\_

formerly managed by \_\_\_\_\_

This change is to be effective \_\_\_\_\_  
(Date)

1. Name of legal owner: \_\_\_\_\_

2. **PAYEE:** Name of person or agency reporting income from this lease: Authority Property Management

3. Tax ID / Social Security Number assigned to **PAYEE:** 47-3412373

4. Address where check is to be mailed: 2663 Victor Ave Redding, CA. 96002

5. Telephone Number: 530-410-6085

~~Please return this form by mail or fax (530-225-4126) along with a copy of the Management Agreement between you and the Owner.~~

I certify that the Tax ID or Social Security Number on line 3 is assigned to the person or agency on line 2. I understand that the IRS Form 1099 Misc and the rental payments will be issued to the person or agency on line 2.

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Date Signed

**All completed forms and required information must be returned by the fifteenth of the month in order for the change to be effective by the first of the following month.**