



Property Management Change Form

Development: _____ BIN: _____

New Management Company: _____

New Management Contact Person: _____

New Management Address: _____

New Management City/State/Zip: _____

New Management Telephone Number: _____

New Management e-mail: _____

Effective Date of Management Company Change: _____

Has this Management Company completed “Request another property” on the Indiana Housing Online Management system? If no, please complete at <https://online.ihcda.in.gov>.

Signature of Owner

Printed Name

Date of Signature