

Notice of Occupancy

RCW 84.36.049 Nonprofit Homeownership Development

1 Nonprofit information

Name of nonprofit organization:

Contact person:

Title:

Phone:

Email:

City:

State:

Zip:

DOR registration number:

2 Homeowner/Purchaser*

*If property was transferred to a non-qualifying buyer, no homeowner/purchaser information is needed.

Name:

Family size:

Phone:

Email:

Property address:

City:

State:

Zip:

Mailing address (if different):

City:

State:

Zip:

3 Property information

Parcel No.:

County:

Date of sale:

4 Attach copy of Warranty Deed.

5 Signature

Qualified

Not Qualified

I swear under penalty of perjury that all statements on this form are true.

Nonprofit Representative:

Print name:

Signature:

Date: