## CHANGE OF USE OR OWNERSHIP STATEMENT

Complete this information only if you have discontinued this use or no longer own the property. Return

this form to: Licensing Division, Department of Inspections and Permits, 2664 Riva Road, MS 6006, Annapolis MD 21401. MDL License Number\_\_\_\_\_ Address \_\_\_\_\_ I certify, by my signature below, that the referenced property is no longer used as a multiple dwelling. Printed Name Date Signature I certify, by my signature below, that the referenced property was sold on \_\_\_\_\_ TO: (Name)\_\_\_\_ (Mailing Address) (Telephone)\_\_\_\_

Date

Signature

Printed Name