

CHANGE OF: OWNERSHIP BUILDING/SITE NAME MAILING ADDRESS

ELEVATOR SAFETY INSPECTION 10946 GOLDEN WEST DR, #160 HUNT VALLEY, MD 21031

elevator.safety@maryland.gov

1 1 (Change of Ownership	Change in Building/	Site Name	Change in Ac	ddress		
	Owner Name (individual, Partnership, Corporation)				Owner Phone		
OWNER	Owner Street Address (or name and address of Agent/Management Company) City, State, Zip						
	Owner Email						
SITE	Site Name (individual, Partnership, Corporation)			County Site Location Phone			
	Site Street Address			Site City, State, Zip			
	Type of Facility (i.e., School, Church, Office Building, etc.)						
LEASE EN	TER CERTIFICATE MAI	LING ADDRESS BEI	LOW *				
MAIL	Mail Name (individual, Partnership, Corporation)		County	County		Mail Location Phone	
	Mail Street Address			Mail City, State, Zip			
	Mailing Email	Title	,		1		
wner / Lessee Representative Name						Representative Phone	
		allowing unit registrat	ion numbors: (a	xample: MT12	234)		
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