

VERIZON WIRELESS HQ NETWORK REAL ESTATE CHANGE OF OWNERSHIP FORM

This form is to notify Verizon Wireless HQ Network Real Estate of a **Change in Ownership** resulting in a new Landlord under an existing lease or similar agreement.

Section 1		
Name of Landlord/Lessor: (as it appears on the Lease)		
Site Name:	Contract Number	er:
Site Address:		
Section 2		
Name of New Lessor: (if multiple Lessors attach additional pages)		
, ,		
Business Name: (if different from above)		
Address:		
City:	State:	Zip Code:
Phone:	Email Address:	
Signature:		Date:
Section 3 – Check off the Change in Owner For a Sold Property, provide the following	ership that applies and provide docu	umentation to support the change.
	nment (legal document of transfer) wh	nich shows the transfer to the new
☐ For a property that has been Given or Devised through an estate or other legal mechanism, provide the following:		
Death CertificateDeed		
Will (as applicable)		
 Letters Testamentary (as applicable Any other probate or document that 	e) t demonstrates who the new owner is	
,		
For a property where a Landlord has begun using or is changing to a New Property Management Company , the property or tower owner must submit a written notice to Verizon Wireless which confirms the following:		
 The property management company is authorized to act on behalf of the new owner. The property management company and Verizon Wireless may deal directly with each owner. 		
	•	·
PLEASE NOTE: Notice of the management arrangement sent solely by the management company will not be accepted unless notice is accompanied by a copy of the management agreement (the page that outlines the agreement and signature page will suffice).		

Rev. 4/2016 Page 1 of 2



VERIZON WIRELESS HQ NETWORK REAL ESTATE CHANGE OF OWNERSHIP FORM

Name:	Contract Number:	
Address:		
	d/Lessor, acknowledge and authorize the new payee(s) noted on this Change of Ownership Form xisting lease or similar agreement.	
nature:	Date:	
t Name:		
nt payments will be delayed if for	orm is not properly acknowledged.	
etion 4 - To be completed by all nore than one payee, make a co YEE 1	Il Payees who will be receiving a rent payment for this existing lease or similar agreement. If ther opy of this page.	
Payee Name	must match the name on the IRS W9 form	
one Number:	Email Address:	
YMENT ADDRESS*	NOTICE ADDRESS	
	ne is used in the Payment Address , it cannot contain a specific name. Payments can only be tment name or department title.	
ment Percentage	If there is only one payee, the percentage should be 100%. If there are multiple payees, all the percentages added together must equal 100%. Do NOT use fractions or decimals.	
ree Signature:	Date:	
at Name:	Il Payees who will be receiving a rent payment for this existing lease or similar agreement. If the payer of this page. The payer was a rent payment for this existing lease or similar agreement. If the payer of this page. The payer was a rent payment for this existing lease or similar agreement. If the payer was a rent payment for this existing lease or similar agreement. If the payer was a rent payment for this existing lease or similar agreement. If the payer was a rent payment for this existing lease or similar agreement. If the payer was a rent payment for this existing lease or similar agreement. If the payer was a rent payment for this existing lease or similar agreement. If the payer was a rent payment for this existing lease or similar agreement. If the payer was a rent payment for this existing lease or similar agreement. If the payer was all the payer was a rent payment for this existing lease or similar agreement. If the payer was a rent payment for this existing lease or similar agreement. If the payer was a rent payment for this existing lease or similar agreement. If the payer was a rent payment for this existing lease or similar agreement. If the payer was a rent payment for this existing lease or similar agreement. If the payer was a rent payment for this existing lease or similar agreement. If the payer was a rent payment for this payer was a rent payment for this existing lease or similar agreement. If the payer was a rent payment for this payer was a rent p	

In addition to providing this form and the required documentation noted above, **EACH payee** will need to submit the following completed forms:

- IRS W9 Form
- HQNRE Electronic Funds (EFT) Form (only if direct deposit is desired)

Changes will be processed upon receipt of all complete and accurate information requested. It takes at least one full payment cycle for these changes to take effect.

Please submit this form via the Network Real Estate Landlord Portal. If you are unable to submit through the tool, then you may send via USPS Certified Mail or traceable carrier to:

Verizon Wireless Attn: Network Real Estate 180 Washington Valley Road Bedminster, NJ 07921

If you have any questions about this form, please call the Verizon Wireless Network Real Estate toll-free Landlord hotline: 866-862-4404.