

Lease Holder Update Form

Dear Tenant,

Please complete this form in its entirety when adding or removing a responsible Lease Holder to your unit.

NEW LEASE HOLDER PROCESSING PROCEDURES:

Obtain the following from the Complex Rental Office in which you plan to reside as a responsible lease holder:

- ◆ *Lease MUST be up for renewal / Payments must be up-to-date*
- ◆ *Tenants to be removed from the lease must submit a notarized letter stating that He/She no longer resides in that unit.*
- ◆ *Application Form*
- ◆ *ÁC'p gy 'hgcug'y kntpggf 'vq'dg'ldi pgf "*
- ◆ *"Wrqp 'étgf w'br rt qxcn épf 'ij g'b ggwpi 'qhlqee wr cpe{ 'l wlf gnp gu 'ij g'p gy 'Qeewr cpv* u'éc p 'dg' éff gf 'vq'ij g'Ngcug0'Vj g'"*
- ◆ *""Tgpw nCi gpv'éc p'kplqto 'l qw'qhl'y g'l wlf gnp gu'qat 'Qeewr cpe{0*
- ◆ *New Lease Holder must submit all new monies for said unit.*

INFORMATION INCLUDED:

- ◆ *Single lease holders cannot transfer their lease to someone else*
- ◆ *Form must be completed in its entirety with 30 days advance notice of lease renewal*
- ◆ *Must be signed by all of the original Lease Holders responsible for lease payments*
- ◆ **MUST BE NOTARIZED**
- ◆ *Failure to meet all requirements will result in no changes to the current lease*
- ◆ *See Rental Agent for additional paperwork required*
- ◆ *Mail to:*

*Middlesex Management
Attn: Leasing Department
P.O. Box 457
Woodbridge, NJ 07095*

Date: _____ Tenant Name(s): _____

Account #: _____ Home Address: _____

Home Telephone #: _____

Please complete Table A if you are removing a Lease Holder from a lease and Table B if you are adding a Lease Holder to your lease.

Table A	
Applicant to be Removed from Lease	
Existing Tenant's Name	

Table B	
Applicant to be added to the Lease	
New Tenant's Name	

By signing below, I (we) authorize the Landlord to make the above requested changes to the Lease. In addition, I (we) understand that applicants to be added to the lease must first be approved by management prior to being added to the lease.

Signature: _____

Signature: _____