



Lucas Metropolitan Housing  
424 Jackson St  
Toledo, OH 43604  
419-259-9448 Fax 419-259-9495  
TRS: Dial 711  
[www.lucasmha.org](http://www.lucasmha.org)

**HCVP CHANGE OF ADDRESS REQUEST – LANDLORD/OWNER**

**I request that my mailing address for all correspondence be changed:**

Name of Landlord/Owner \_\_\_\_\_

\_\_\_\_\_  
Previous Address

\_\_\_\_\_  
City, State, Zip Code

**To New Address:**

\_\_\_\_\_  
New Address

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Landlord/Owner Signature

\_\_\_\_\_  
Date

- Email completed and signed form as a *Printable Attachment* to: [changeofownership@lucasmha.org](mailto:changeofownership@lucasmha.org)
- Or fax to: 419-259-9495
- Or mail, or in person, to: LMH, 424 Jackson St., Toledo, OH 43604

[www.lucasmha.org/landlords](http://www.lucasmha.org/landlords)

To set up an account in LMH Landlord Portal to view your payments and other information, visit:

[LMH Landlord Portal Account](#)