

**AFFIDAVIT OF NEW OWNERSHIP**

STATE OF MICHIGAN  
MUSKEGON TOWNSHIP  
COUNTY OF MUSKEGON

\_\_\_\_\_, being duly sworn, state that I / We  
(New Owner(s) Name)

are purchasing the property referenced below and that I / We acknowledge receipt of  
the Township Notice to Repair and Defect List, regarding the Rental inspection of :

\_\_\_\_\_,  
(Property Address)

from \_\_\_\_\_  
(Former Owner Name)

Furthermore, I accept full responsibility, without condition, for making the corrections or  
repairs required by such compliance orders or notice of violation.

By \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_ Date \_\_\_\_\_

Subscribed and sworn to before me this

\_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

\_\_\_\_\_  
Notary Public, Muskegon County, Michigan

My commission expires: \_\_\_\_\_

**Return copy to:** Muskegon Charter Township  
Rental Inspections Unit  
1990 E. Apple Ave.  
Muskegon, MI 49442

**THIS FORM MUST BE NOTARIZED TO BE SUBMITTED AND VALID**