

**REQUEST  
FOR  
TENANT ESTOPPEL  
SUBORDINATION NON-DISTURBANCE AND ATTORNMENMENT AGREEMENT (SNDA)**

**This is a request for:**

State Lease Number: \_\_\_\_\_  
Facility Address: \_\_\_\_\_  
City: \_\_\_\_\_

Tenant Estoppel (\$250.00 fee)  
SNDA (\$250.00 fee)  
Both (\$400.00 fee)  
Payment attached. *Please note that executed documents will not be released until payment has been received.*

**Requested By:**

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City: \_\_\_\_\_  
Contact: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Fax No: \_\_\_\_\_

**Explanation:**

Refinance  
Purchase of leased Property in process requested on behalf of new owner (Prospective Purchaser)  
Prospective Purchaser's Name/Address:  
\_\_\_\_\_  
\_\_\_\_\_  
Purchase of leased Property completed, Requested on behalf of new owner  
Other: \_\_\_\_\_

**Lender:**

Name: \_\_\_\_\_  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
Contact: \_\_\_\_\_  
Phone & Fax: \_\_\_\_\_

**Provide the Name and Address of Entity if the requested documents are to be sent somewhere other than the Lender.**

Name \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
Contact: \_\_\_\_\_  
Phone & Fax: \_\_\_\_\_

**SEND REQUEST AND PAYMENT TO:**

**Department of General Administration  
Financial Office  
Attention: Rita Taipale  
210 11<sup>th</sup> Ave. SW, Room 303  
Olympia, Washington 98504-1008**

Contact: [ratwood@ga.wa.gov](mailto:ratwood@ga.wa.gov) or [cshill@ga.wa.gov](mailto:cshill@ga.wa.gov) or [ijohnso@ga.wa.gov](mailto:ijohnso@ga.wa.gov)  
Phone: (360) 902-7346 (360) 902-7285 (360) 902-0923  
Fax: (360) 586-9088 (360) 586-9088 (360) 586-9088