

# Tenant Contact Information Form

**Date Completed:**

<b>Company Name:</b>	
<b>Suite Number:</b>	
<b>Number of Employees:</b>	
<b>Main Phone:</b>	<b>Fax:</b>

## Primary Contact for Daily Activities

<b>Name:</b>	<b>Title:</b>
<b>Office Phone:</b>	<b>Home Phone:</b>
<b>Cell Phone:</b>	<b>Email:</b>

## Secondary Contact for Daily Activities

<b>Name:</b>	<b>Title:</b>
<b>Office Phone:</b>	<b>Home Phone:</b>
<b>Cell Phone:</b>	<b>Email:</b>

## Additional Contact for Daily Activities

<b>Name:</b>	<b>Title:</b>
<b>Office Phone:</b>	<b>Home Phone:</b>
<b>Cell Phone:</b>	<b>Email:</b>

**Accounting Contact: Recipient of Monthly Tenant Bill-Backs/Invoices**

<b>Name:</b>	
<b>Office Address:</b>	
<b>Office Phone:</b>	<b>Cell Phone:</b>
<b>Email:</b>	

**Lease Contact: Recipient of Rent Letters and Lease Information**

<b>Name:</b>	
<b>Office Address:</b>	
<b>Office Phone:</b>	<b>Cell Phone:</b>
<b>Email:</b>	

**Emergency Contacts (in order to contact)**

<b>#1 Name:</b>	<b>Title:</b>
<b>Office Phone:</b>	<b>Home Phone:</b>
<b>Cell Phone:</b>	<b>Email:</b>

<b>#2 Name:</b>	<b>Title:</b>
<b>Office Phone:</b>	<b>Home Phone:</b>
<b>Cell Phone:</b>	<b>Email:</b>

<b>#3 Name:</b>	<b>Title:</b>
<b>Office Phone:</b>	<b>Home Phone:</b>
<b>Cell Phone:</b>	<b>Email:</b>