

Completed By:	
Form Dated:	

Tenant Contact Information Sheet

Company: _____ Suite #: _____ Main Phone Number: _____ Fax #: _____

Primary Contact: The first point of contact for all notifications and inquiries from OTB						
	First Name	Last Name	Title	Primary Phone	Cell Phone	Email Address
1						
2						

Security Contact: To be contacted by lobby security regarding building visitors						
	First Name	Last Name	Title	Primary Phone	Cell Phone	Email Address
1						
2						

Daily Contacts: Persons to be contacted for daily business operations & notifications (e-mail distribution list)						
	First Name	Last Name	Title	Work Phone	Cell Phone	Email Address
1						
2						
3						
4						
5						

Emergency Contacts: Person(s) to be contacted in case of an emergency after building hours - (At least 2) (HVAC, Server Rooms, Ringclear system, fire, flood, building closing)							
	First Name	Last Name	Title	Home Phone	Cell Phone	Wireless Carrier	Email Address
1							
2							
3							
4							
5							

Billing: Person(s) to contact regarding rent payment, invoices, and any billing inquiries						
*Please indicate how you prefer to receive monthly building invoices: Mail: _____ Email: _____						
	First Name	Last Name	Title	Work Phone	Email Address	Mailing Address
1						
2						

Tenant Executives: Persons responsible for company-wide, executive-level decision making at this location					
	First Name	Last Name	Title	Work Phone	Email Address
1					
2					
3					
4					
5					

Work Order Users: Person(s) authorized to enter work orders via Building Engines						
Please Note: Additional users can be added by contacting the office of the building						
	First Name	Last Name	Title	Work Phone	Cell Phone	Email Address
1						
2						
3						
4						
5						