



TENANT INFORMATION – CONTACT LIST

Please complete the following questionnaire (type or print)

Business Name: _____

Business Address (physical): _____

Business Mailing Address: _____

Business Phone: _____

Business Fax: _____

Business Email: _____

Business Website: _____

Owner/Manager: _____

Office Manager: _____

Hours and Days of Operations: _____

Number of Employees: _____

Alarm System: Yes or No

TENANT CONTACT INFORMATION, CONT.

List Office Manager to Receive General E-mail Announcements

Name	Position	Phone	Fax	Email

List Emergency Contacts Including Contacts for After Hour Emergencies

Name	Position	Phone	Fax	Email

List Main Contact for Lease Issues

Name	Position	Phone	Fax	Email

List Main Contact for Billing Issues

Name	Position	Phone	Fax	Email

List Additional Employees to Receive Creekside Newsletter

Name	Phone	Email