



Tenant Contact Information Form 2023

Building: _____ Clinic: _____

PRIMARY CONTACT

(The on-site "daily" contact, will be contacted for suite maintenance and general building related issues.)

Contact Name & Title: _____

Direct Phone #: _____ Cell Phone #: _____

Email Address: _____ ☐ Emergency Contact

ADDITIONAL CONTACTS

(These individuals will be contacted in the event of any business or after-hours building emergency. The contacts must be available 24 hours per day and will be asked to respond to emergencies effecting your business, i.e. security, fire, power failure, etc.)

Contact Name #1 & Title: _____

Direct Phone #: _____ Cell Phone #: _____

Email Address: _____ ☐ Emergency Contact

Contact Name #2 & Title: _____

Direct Phone #: _____ Cell Phone #: _____

Email Address: _____ ☐ Emergency Contact

Contact Name #3 & Title: _____

Direct Phone #: _____ Cell Phone #: _____

Email Address: _____ ☐ Emergency Contact

ACCOUNTING CONTACT

Contact Name & Title: _____

Direct Phone #: _____ Cell Phone #: _____

Email Address: _____

SECURITY INFORMATION

(In the event of a building emergency, we may need to access your suite. Please provide the information below for use in case of an emergency situation.)

Do you have a keypad door entry or security system? ☐ Yes ☐ No

Door Keypad Code: _____

Alarm/Security Codes: _____

Alarm Security Company: _____

Security Company Phone #: _____

Additional Notes or Information:



Tenant Contact Information Form 2023

Regular Hours:

Monday:

Tuesday:

Wednesday:

Thursday:

Friday:

Saturday:

Sunday:

Holiday Hours:

Memorial Day:

July 3:

Independence Day:

July 5:

Labor Day:

November 22:

Thanksgiving:

Day after Thanksgiving:

Christmas Eve:

Christmas Day:

Day after Christmas:

New Year's Eve:

New Year's Day:

January 2: