



2050 Main

Tenant Name: Tenant Emergency Contact Form

Primary Office Contact

This per will be included on building announcements
Name: _____
Office Phone: _____
Cell Phone: _____
Fax Number: _____
Email Address: _____

Secondary Office Contact

This per will be included on building announcements.
Name: _____
Office Phone: _____
Cell Phone: _____
Fax Number: _____
Email Address: _____

Accounting Contact

Accounts Payable, person responsibility for rent payment
Name: _____
Office Phone: _____
Cell Phone: _____
Fax Number: _____
Email Address: _____
Mailing Address: _____

Insurance Contact

Person responsible for Certificate of Insurance
Name: _____
Office Phone: _____
Cell Phone: _____
Fax Number: _____
Email Address: _____
Mailing Address: _____

Primary Emergency Contact

After-Hours Emergency Contact (Required)
Name: _____
Office Phone: _____
Cell Phone: _____
Fax Number: _____
Email Address: _____

Secondary Emergency Contact

After-Hours Emergency Contact (Required)
Name: _____
Office Phone: _____
Cell Phone: _____
Fax Number: _____
Email Address: _____

Lease Administrator

Executive contact for Premises and Lease
Name: _____
Office Phone: _____
Cell Phone: _____
Fax Number: _____
Email Address: _____

Blank Contact Section

Name: _____
Office Phone: _____
Cell Phone: _____
Fax Number: _____
Email Address: _____

Required Correspondence/Notice Address

Address: _____

Alarm Code Required (if applicable)

Code: _____
Hours: _____

Employee Count: _____

Please email form back to Amber Hatchell at:
ahatchell@greenlawpartners.com
Should you have any questions, please contact the Management Office.