## **Brookfield**

BUILDING :			
TENANT NAME :			SUITE NO. :
General Tenant Information			
Legal Tenant Name:		Number of Employees:	
Mailing Address:		Internet Website:	
Main Phone Number:		Type of Business:	
Main Fax Number:		Operating Hours:	
Tenant Representative (Primary Contact)		Accounting Contact (Rental Statements/Invoicing)	
Name:		Name:	
Title:		Title:	
Mailing Address:		Mailing Address:	
Phone No.		Phone No.	
Email Address:		Email Address:	
Senior Contact (Leasing/Renewals)		Other Contact (Specify Department)	
Name:		Name:	
Title:		Title:	
Mailing Address:		Mailing Address:	
Phone No.		Phone No.	
Email Address:		Email Address:	
Service Requests & Building Communication  Please list all employees eligible to issue online service requests (billable and nonbillable) below. These individuals will also receive general building notifications (i.e., elevator outages) unless otherwise noted.			
Contact Name/Title	Room #	Office Phone	Email Address
Please refer to "Emergency Contact Form	" to list c	ontacts for Emerge	ncy Alerts, Fire Wardens & Disabled.