

## TENANT CONTACT INFORMATION INSTRUCTIONS

In order to ensure optimal communication between Management and the tenants, CBP is requesting your assistance in completing this Tenant Contact Information Form. As a result of prior research of the Lease Agreements and Amendments, and subsequent information provided by the tenants, CBP maintains a list of tenant contacts. However, to be sure information is dispatched to the correct people in your company; CBP would like your confirmation.

Chapelbridge Park Management maintains the following kinds of contact information:

**PRIMARY ON-SITE CONTACT** – The Primary on-site contact is the individual in your firm, located on site at the leased premises, which has decision-making authority and is CBP's primary contact for property management issues.

**FINANCIAL** – The Financial Contact is the individual to whom rent statements and annual operating expense statements are sent. The Financial Contact is required.

**EMERGENCY** – The Emergency Contacts (there may be more than one) are those individuals who have decision-making authority and/or live close to the office, who may be notified after normal business hours in the event of an emergency. Phone numbers provided may include home phone numbers, cell phones, etc.

## TENANT CONTACT INFORMATION

Please provide the following information regarding your leased space at **Chapelbridge Park**.  
The information you provide is for our use only and will remain confidential.

**Important: Please type or print clearly**

COMPANY NAME: \_\_\_\_\_ SUITE #: \_\_\_\_\_

TELEPHONE #: \_\_\_\_\_ FAX #: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

### PRIMARY ON-SITE CONTACT (Office Manager, etc.):

Name & Title: \_\_\_\_\_

Telephone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

### FINANCIAL CONTACT (Contact person for rent and other payments):

Name & Title: \_\_\_\_\_

Address (*if different from above*): \_\_\_\_\_  
\_\_\_\_\_

Telephone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

### EMERGENCY CONTACTS (Members of your company who should be notified in the event of an after-hours emergency at the property. Please provide three contacts)

Name & Title: \_\_\_\_\_

Home Telephone #: \_\_\_\_\_ Cell#: \_\_\_\_\_

Name & Title: \_\_\_\_\_

Home Telephone #: \_\_\_\_\_ Cell#: \_\_\_\_\_

Name & Title: \_\_\_\_\_

Home Telephone #: \_\_\_\_\_ Cell#: \_\_\_\_\_

### INFORMATION SUBMITTED BY:

Name & Title: \_\_\_\_\_ Date: \_\_\_\_\_