BROOKFIELD

FULBRIGHT TOWER

TENANT INFORMATION

TENANT:		
SUITE NO:		
NUMBER OF EMPLOYEES: MAIN PHONE NUMBER: FAX NUMBER:		
WEBSITE ADDRESS: —		
AUTHORIZED TENANT CONTACT		
NAME:		
NAME:		
DIRECT PHONE NO.:		
E-MAIL ADDRESS:		
ALTERNATE NAME:		
DIRECT PHONE NO.:		
E-MAIL ADDRESS:		
EMERGENCY AFTER-HOURS CONTAC	TS (Please provide 3 names)	
NAME:		
HOME PHONE NUMBER:	CELL:	
NAME:		
HOME PHONE NUMBER:	CELL:	
NAME:		
HOME PHONE NUMBER:	CELL:	
TOP LOCAL SENIOR EXECUTIVES (List	more than one if applicable)	
NAME:TITLE:		
DIRECT PHONE:		
COMPANY HOLIDAYS		
1	2	
3. 5.	4	
5 7		

1	2	
2	4	

FLOOR/FIRE WARDEN(S)

We will periodically ask that you assist us in keeping this information current. Please inform us of any changes between updates.