

Tenant Contact Form

THE GAS COMPANY TOWER
555 West 5th Street | Los Angeles, CA 90013

Date: _____

Company Name: _____

Type of Business: _____ Main Suite #: _____

Main Phone #: _____ Main Fax #: _____

of Employees: _____ # of Computers: _____

Tenant Space Alarm

No

Yes (please complete following*)

Location/Description*:	Hours Alarm is Activated*:
Alarm Company*:	Alarm Company Phone #*:

Business Contacts

Emergency numbers will only be used in case of emergencies - please be sure to give a number other than office phone numbers where individuals can be reached after hours.

Principal of Company - <u>on site</u> :	Direct Office Phone #:
E-mail Address:	After Hrs Emergency Phone #: Mobile Home

Primary Daily Contact/Office Manager:	Direct Office Phone #:
E-mail Address:	After Hrs Emergency Phone #: Mobile Home

Secondary Contact:	Direct Office Phone #:
E-mail Address:	After Hrs Emergency Phone #: Mobile Home

Memo Distribution List (Individuals listed below will receive all building correspondences)

Name:	Email Address:
Name:	Email Address:
Name:	Email Address:
Name:	Email Address:
Name:	Email Address:

Accounting Contacts

Rent Statement, Sundry Invoices & Operating Expenses Preference: Email USPS Mail

**If rent & sundry statement preference is by email, below individual will be emailed as requested

Accounts Payable Contact**:	Direct Office Phone #:
E-mail Address:	Accounting Address - if off site:

Operating Expenses Contact (if different from above):	Direct Office Phone #:
E-mail Address:	Accounting Address - if different from above: