

BUILDING : FIRST CANADIAN PLACE

TENANT NAME : _____

SUITE NO. : _____

COMPLETED BY: _____
PRINT NAME

DATE SUBMITTED: _____

Normal Hours of Operation : _____ A.M. to _____ P.M.

SPECIAL INSTRUCTIONS:

Contact Name/Title	*Call Order (eg. 1, 2)	Email	Telephone Number			
			Business	Cell	Blackberry	Home

* The Call Order is the sequence in which we should call your contacts (eg. #1 would be the first person to contact)
 In the event of an emergency, it is imperative that the Property Management Office has a current listing of contacts. Should the emergency contact information change, please complete and return the form to the Property Management Office providing a revised list of the emergency contacts for your premises.