

Tenant Contact Information

Company Information

Business Name: _____ Building: _____

Suite #: _____ Phone : _____

Mailing Address: _____

Number of Employees: _____

Office Contact | Contact who receives all building related memos and other correspondence

Name: _____ Phone: _____

Title: _____ Email: _____

Lease Contact | Contact pertaining to lease inquiries

Name: _____ Phone: _____

Title: _____ Email: _____

Mailing address: _____

Accounting Contact | Contact responsible for accounts receivable/payable

Name: _____ Phone: _____

Title: _____ Email: _____

Mailing Address _____

Insurance Contact | Contact responsible to provide certificate of insurance

Name: _____ Phone: _____

Title: _____ Email: _____

Mailing Address: _____

After Hours Emergency Contact | This information will only be used in the event of an emergency

1. Name: _____ Phone: _____

Title: _____ Email: _____

2. Name: _____ Phone: _____

Title: _____ Email: _____

ASPENPROPERTIES.CA

Suite 400, 10104 – 103 Avenue | Edmonton, AB | T5J 0H8

edmontonreception@aspenproperties.ca

780.442.3100

Tenant Contact Information

Fire Warden, Life Safety Contact | Minimum two per office and floor

1. Name: _____ Phone: _____
Title: _____ Email: _____
2. Name: _____ Phone: _____
Title: _____ Email: _____

Additional floor

1. Name: _____ Phone: _____
Title: _____ Email: _____
2. Name: _____ Phone: _____
Title: _____ Email: _____

Individuals Requiring Assistance

- Name: _____ Injury or condition: _____
- Name: _____ Injury or condition: _____
- Name: _____ Injury or condition: _____

Completed by: _____ Date: _____

If any contact information changes throughout your tenancy, please provide the updated information to Aspen Properties so that our records may be updated accordingly. Please return completed form to edmontonreception@aspenproperties.ca



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