



Tenant Contact Information

Please fill out all fields to ensure all records are current and up to date

Company 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: _____

Legal Contact (Contact pertaining to lease)

Name: _____ Phone: _____

Title: _____ Email: _____

Mailing address: _____

Accounting Contact (Contact responsible for Accounts Payable/Receivable)

Name: _____ Phone: _____

Title: _____ Email: _____

Billing Address: _____

Insurance Contact (Information will be provided to MARSH Canada)

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: _____



Fire Warden/Life Safety Contact (Minimum two per office, per floor)

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

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

Fire Warden/Life Safety Contact - 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: _____

Thank you for assisting us in keeping our records accurate.

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 this form by email to edmontonreception@aspenproperties.ca