TENANT COMMUNICATIONS

Please indicate the name(s) of individual(s) in your group who has been designated as your "Contact Person" to communicate with Property Management regarding temperature control, maintenance, janitorial, security, or any other building related items. All communication and responses will be channeled through this individual. This will greatly increase our ability to effectively respond to your needs. Also, please indicate whether this person may authorize service requests, which may result in a charge back to the tenant.

Company Name:

Suite Number:	-	
Contact Person	Authorized t result in a charge back.	to sign work orders that may
	Yes	No
	Yes	No
	Yes	No
Signature of authorized individual must a	appear below authorizing above contac	ct person(s).
AUTHORIZED BY:		
Printed Name:		
Title:		
Date:		