



Tenant Information Form

COMPANY INFORMATION	
Premises Address	Suite No.
Company Name	Corp/LLC Partnership/LLP Sole
Federal Tax ID or SSN	Regular Business Hours
Primary Contact	Title
Email Address of Contact	Mobile Phone
Email Address for Monthly Rent Statements (<i>provide multiple email addresses separated with a comma</i>)	
Business Phone	Business Fax
Mailing Address	
GENERAL LIABILITY INSURANCE INFORMATION	
Insurance Agent	Agent Phone
Insurance Company (<i>Gen Liability</i>)	Policy Number

OWNER/PRINCIPAL INFORMATION	
Name	Title
Home Address	City, State & Zip
Email Address	Cell Phone
Name	Title
Home Address	City, State & Zip
Email Address	Cell Phone

AFTER HOURS EMERGENCY INFORMATION	
Primary Contact	Title
Cell Phone	Email Address
Secondary Contact	Title
Cell Phone	Email Address

Fax to 818-717-0257 or email to ccabanting@tsco-re.com