



## EMERGENCY/OFFICE CONTACT LIST

**COMPANY NAME:** \_\_\_\_\_ **FLOOR(S)** \_\_\_\_\_

**MAIN PHONE NUMBER:** \_\_\_\_\_

Emergency contact person/persons in case of an after-hour emergency.

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Home Phone# \_\_\_\_\_ Mobile: \_\_\_\_\_

Secondary Emergency Contact - in the event the designated main point of contact is not in the office, they will be able to inform staff on their behalf.

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Home Phone# \_\_\_\_\_ Mobile: \_\_\_\_\_

*\*Mobile Numbers will ONLY be used as a last resort to contact you and/or keep you informed, or in the event of a phone outage, evacuation, etc. during an emergency*

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Office Contact for general information and memos.

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Authorized person/persons to request chargeable work within the tenant space. (example: after hour HVAC requests)

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_

**COMPLETED BY:** \_\_\_\_\_

**Title:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Please fill out and return to the Office of the Management: [cryan@coretrustmanagement.com](mailto:cryan@coretrustmanagement.com)