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| **CAPELLA TOWER**  **TENANT INFORMATION FORM** | | | | | |
| **TENANT INFORMATION**  Tenant: Employee Count:  Suite #: Floor(s): Office Hours: Reception Phone #: | | | | | |
| **TENANT CONTACT INFORMATION**  NAME EMAIL ADDRESS | Submit AARS | Request After-Hours HVAC | Request Access Cards/ Keys | Cleaning & Maintenance Request | Receive Building Notices & Communications |
| **AFTER HOURS EMERGENCY CONTACTS**  Those listed will be contacted in the event of an emergency in your suite. Calls will be made in the order listed until someone is reached.  NAME TITLE PHONE #1 PHONE #2 | | | | | |
| **AFTER HOURS ACCESS POLICY**  Access by Photo ID (recommended)  Employees who forget their card/key can gain access into their spaces by Security Officers based on the records from their picture card and a personal ID card.  Call Emergency Contact  Employees who forget their card/key are only admitted with a call to the Emergency Contact list. If no contacts can be reached, the person will not be admitted.  Restricted List  Employees who forget their card/key can be admitted from a special list decided upon by the tenant and submitted to Capella Tower Management. Please attach an additional page listing those who will be allowed after hours access.  No Access  Employees who forget their card/key will not be admitted and need to return on a regular business day. | | | | | |
| **LEASE DECISION-MAKER**  NAME TITLE EMAIL PHONE | | | | | |
| **ACCOUNTING CONTACT(S)**  NAME TITLE EMAIL PHONE | | | | | |

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| **REGULAR LOADING DOCK DELIVERIES/VENDORS**  Vendors listed below do not require an Authorized Activity Report (AAR). |
| **SAFETY MANAGERS**  It is recommended to have 1 Safety Manager per 35 employees.  NAME FLOOR # EMAIL PHONE # |
| **PHYSICALLY CHALLENGED EMPLOYEES**  Please list all those who may need assistance exiting the building in the event of an emergency.  NAME FLOOR # ADDITIONAL INFORMATION |