

1803 DOUGLAS STREET



TENANT COMMUNICATIONS

Please email (service@petersonbc.com) or fax (604.688.3245).

Date: _____

Tenant Name: _____ Suite #: _____

Prepared By: _____ Phone Number: _____

Email Address: _____

OFFICE CONTACTS

Name of Principal(s) or Senior Manager in Charge

Name: _____ Title: _____

Name: _____ Title: _____

Send Invoices / Correspondence to:

Name: _____ Title: _____

Name of "Anchor" Person:

Please designate one "anchor" person for the routing of all service requests, information, etc., to minimize possible duplication and confusion.

Name: _____ Title: _____

AFTER HOURS EMERGENCIES

Please provide the names and home telephone numbers of at least three (3) responsible persons within your organization who may be contacted in the event of an emergency. Names will be called in order of sequence until contact is made.

Name	Title	Phone No.
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____