



IBC PLAZA

TENANT EMERGENCY CONTACT INFORMATION

As part of our ongoing effort by the Management Team to provide a safe and comfortable work environment, please provide us with the following information. This information is extremely important and a necessity in the event of an emergency.

Full Company Name: _____

Daily Contact Person (calling in lights out, too hot, etc.): _____

Executive Contact Person: _____

Company Phone: _____ Fax: _____

Number of Employees in Office: _____

After Hours / Emergency Contacts

Home Phone #: _____ Cellular Phone #: _____

Email: _____

Secondary Contact: _____

Home Phone #: _____ Cellular Phone #: _____

Email: _____

Please scan and return the completed form back to the IBC Plaza Management Office, Suite 409 or by e-mail to leem@senterrareg.com. Thank you!