



**New Lease Information**

DATE OF LEASE: \_\_\_\_\_ PROPERTY NAME: \_\_\_\_\_  
TENANT NAME: \_\_\_\_\_ PROPERTY #: \_\_\_\_\_

<b>NEW TENANT CONTACT:</b> Name of Contact: _____ Address: _____ Cell Phone: _____ Work Phone: _____ Email Address: _____
<b>ACCOUNTING CONTACT:</b> Name of Contact: _____ Work Phone: _____ Email Address: _____
<b>MARKETING CONTACT:</b> Name of Contact: _____ Work Phone: _____ Email Address: _____
<b>TENANT INSURANCE CONTACT:</b> Insurance Company Name: _____ Insurance Contact: _____ Cell Phone: _____ Work Phone: _____ Email Address: _____
<b>TURNOVER CONTACT:</b> Name: _____ Insurance Contact: _____ Cell Phone: _____ Work Phone: _____ Email Address: _____

Please send the completed form to the Property Manager for the listed property.