



TENANT INFORMATION SHEET

Please send completed form to greception@vestar.com.
All information is kept confidential and used only for office-related purposes.

TENANT:	
PROPERTY ADDRESS:	
PHONE:	
EMAIL:	

BUSINESS CONTACTS:

1st Contact:

NAME:	
TITLE:	
PHONE:	
EMAIL:	

2nd Contact:

NAME:	
TITLE:	
PHONE:	
EMAIL:	

GROSS SALES CONTACT (if applicable):

NAME:	
EMAIL:	



BILLING CONTACT:

NAME:	
PHONE:	
EMAIL:	

LEASING CONTACT:

NAME:	
PHONE:	
EMAIL:	

EMERGENCY CONTACTS:

1st Contact:

NAME:	
TITLE:	
PHONE:	
EMAIL:	

2nd Contact:

NAME:	
TITLE:	
PHONE:	
EMAIL:	