

TENANT INFORMATION UPDATE FORM

Please keep Empire State Realty Trust Management Office updated on any changes that may occur to this information sheet throughout the year.

Please type or print the following information: Fax # 203-353-4010 Attn: Mistie

Date: _____

Tenant Name:

(Please indicate the formal name of your organization that is used in legal documents)

Main Phone #: _____

Fax #: _____

Web Site: _____

E-mail: _____

President / CEO: _____ Phone/Ext. #: _____

Office Manager: _____ Phone/Ext. #: _____

Daily Contact: _____ Phone/Ext. #: _____

Accounts Payable: _____ Phone/Ext. #: _____

CFO: _____ Phone/Ext. #: _____

After Hours Emergency Contact: _____ Phone #: _____

of Employees: _____

Is Your Space Alarmed. If so, Code #: _____

Card Access: _____

Do you have any handicap employees? If so, please list and explain (this information is for emergencies only).

Send Bills to:

