

Sanctuary Park Tenant Services Manual

TENANT INFORMATION

SANCTUARY PARK

Company

Name: _____

Building: _____ Suite Number: _____

Phone: _____ Fax: _____

Primary contact after move-in: _____

*Name, address, and phone number of person to contact PRIOR to move-in:

*Name, address, and phone number of person responsible for lease negotiations and compliances:

*Name, address, and phone number of person to whom rent statements and other business billings should be sent:

EMERGENCY AFTER-HOURS CONTACTS:

Contact: _____ Phone#: _____

Contact: _____ Phone#: _____