

Name of Firm:

Jones Lang LaSalle Americas, Inc. Cypress Park West 6700 North Andrews Ave. Suite 106 Fort Lauderdale, FL 33309

TENANT AUTHORIZATION, EMERGENCY CONTACT & BUSINESS CONTACT INFORMATION SHEET

The information provided in this form will enable us to coordinate building activities and share information with appropriate parties in the day to day operations of the property or in the event of an emergency. Once you have filled out this information sheet, kindly email it to Tania.Leon@am.jll.com, or mail it to the Management Office at: Cypress Park West 6700 N Andrews Ave Suite 106, Fort Lauderdale, FL 33309. If you have any questions, do not hesitate to call the Management Office at 954-351-9666.

Suite No.:	Phone No.:		Fax No.:			
Company Business Hours:						
Please attach a list of your employees at this building as well as a company holiday schedule.						
EMERGENCY: Please list below persons to be contacted in case of an emergency or to authorize admittance to the suite listed above: Name & Title Direct Phone Home Phone Mobile Phone e-mail address						
Name & Title	Direct Filone	Home I no	16	MODILE I HOHE	C-man address	
After normal business hours, please admit individuals not possessing keys to our office on the following basis (check one): Anyone presenting reasonable identification Only persons cleared by phone with any of the above persons No one without our written authorization						
DAY TO DAY BUSINESS OPERATIONS: Please list below persons to be contacted for <u>day-to-day business operations</u> :						
Name & Title		n Phone	Direct Ph	none	e-mail address	
WORK ORDER, SERVICE A Please list below persons au Name & Title	uthorized to request a		ce the removal (Direct Ph			
BILLING SPECIAL ASSISTANCE						
Please list below person to be contacted regarding payment of rent (or where the rent statement should be mailed):			Please list below any employees who may require special assistance during an emergency due to a disability (for multiple-floor tenants please indicate which floor each employees is on):			
Name:			•			
Title:			•			
Street Address:						
City, ST & ZIP						
Phone:		<u> </u>				
Fax: E-mail Address:		<u>-</u>				
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