



Tenant Contact Information Request Form

1900-2000 University Avenue – East Palo Alto, CA 94303

Please fill in the following information and return a copy to Jake Arnet, jake.arnet@columbia.reit.

Tenant Information

Name of Tenant:	
Street Address:	
Main Phone:	Fax:
Website:	
Number of Employees:	Hours of Operations:

Primary Contact Information

Name:	Title:
Office Address:	
Office Phone:	Fax:
Cell Phone:	Email:

Secondary Contact Information

Name:	Title:
Office Address:	
Office Phone:	Fax:
Cell Phone:	Email:

Corporate Contact Information / Executive Contact

Name:	Title:
Office Address:	
Office Phone:	Fax:
Cell Phone:	Email:

Accounting Contact Information

Name:	Title:
Office Address:	
Office Phone:	Fax:
Cell Phone:	Email:

After Hours Emergency Contacts (in order to contact)

#1 Name:	Title:
Cell Phone:	Home Phone:
Email:	

#2 Name:	Title:
Cell Phone:	Home Phone:
Email:	

#3 Name:	Title:
Cell Phone:	Home Phone:
Email:	

#4 Name:	Title:
Cell Phone:	Home Phone:
Email:	

IT Contact Information (if applicable)

Name:	Title:
Office Address:	
Office Phone:	Fax:
Cell Phone:	Email:

Office Holidays

Please identify the days your office is typically closed.

New Year's Day	MLK, Jr. Day	Presidents' Day	Good Friday
Memorial Day	Independence Day	Juneteenth	Thanksgiving Day
Day after Thanksgiving	Christmas Eve	Christmas Day	New Year's Eve
Additional Days:			