**TENANT CONTACT & AUTHORIZATION FORM**

**Form CT-02 16000 Ventura**

*To provide us with information about the individuals you have authorized for various purposes, please complete this form, have an authorized person sign it and return it to the Office of the Building.*

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| --- | --- | --- |
| **Tenant Name:** |  | **Contact Phone #:** |
| **Suite No.:** |  | **Date:** |

|  |
| --- |
| **THE FOLLOWING PERSONS ARE DESIGNATED TO ACT ON BEHALF OF THE TENANT AS SPECIFIED BELOW:** |
| **Name** | **Title** | **Phone** | **Cell** | **Email** |
|  |  |  |  |  |
| Order billable services and access cards | Lease related matters | Emergency contact | Accounting/Billing | Other  |
|  |  |  |  |  |
| Order billable services and access cards | Lease related matters | Emergency contact | Accounting/Billing | Other  |
|  |  |  |  |  |
| Order billable services and access cards | Lease related matters | Emergency contact | Accounting/Billing | Other  |
|  |  |  |  |  |
| Order billable services and access cards | Lease related matters | Emergency contact | Accounting/Billing | Other  |
|  |  |  |  |  |
| Order billable services and access cards | Lease related matters | Emergency contact | Accounting/Billing | Other  |
|  |  |  |  |  |
| Order billable services and access cards | Lease related matters | Emergency contact | Accounting/Billing | Other  |
|  |  |  |  |  |
| Order billable services and access cards | Lease related matters | Emergency contact | Accounting/Billing | Other  |

If you need more space, please add additional copies of this form.

|  |  |  |
| --- | --- | --- |
| **Tenant Authorized Person:** | Signature: |  |
| Type/print name & title: |  |

***Please remember to inform us promptly if there are any changes.***

If you have any questions, please contact the Office of the Building:

Phone: 818-783-3335 Fax: 818-783-1351 Email: 16000ventura@douglasemmett.com

16000 Ventura Boulevard, Suite 490, Encino, CA 91436

**Revised 08/13**