



Hertz Cleveland North Point
901 – 1001 Lakeside Avenue
Cleveland, OH 44114

T 216-623-6500
F 216-623-0333

Tenant Information Form:

This is confidential information and will be kept on file in the Hertz Cleveland North Point Management office for emergency purposes only. Please complete all fields.

Tenant Name: _____ Building & Suite #: _____

Type of Business: _____ Business Phone: _____

Estimated number of on-site Employees: _____ Business Fax: _____

Tenant Contacts (please print):

Daily Contact E-mail Address Phone #

Accounts Payable Contact E-mail Address Phone #

Building E-mail Notification Contact E-mail Address Phone #

Building E-mail Notification Contact E-mail Address Phone #

Authorized Signers to Request Building Access Cards, Remove Office Equipment and/or Verify After-hours Employee Access:

1. _____
Name (PRINT) Signature

E-mail Address Phone #

2. _____
Name (PRINT) Signature

E-mail Address Phone #



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Authorized Signers to Request Billable and Nonbillable Work Orders:

1. _____
Name (PRINT) Signature

E-mail Address Phone #

2. _____
Name (PRINT) Signature

E-mail Address Phone #

After Hours/ Emergency Contacts:

1. _____
Name E-mail Address

Direct Phone # Cell Phone # Home Phone #

2. _____
Name E-mail Address

Direct Phone # Cell Phone # Home Phone #

3. _____
Name E-mail Address

Direct Phone # Cell Phone # Home Phone #

Please indicate any staff member that requires special assistance in the event of an emergency (i.e. physically impaired employees). If changes are made to this list notify management immediately

1. _____ 2. _____
3. _____ 4. _____



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Floor Warden:

A Floor Warden is a tenant designated employee to play a lead role in emergency situations and be familiar with the office and building evacuation plan(s), floor layouts, and location and use of fire equipment.

Name

E-mail Address

Deputy Floor Warden:

A Deputy Floor Warden is a tenant designated employee to take direction from the Floor Warden and perform as Floor Warden in their absence. Please designate at least 2 employees.

Name

E-mail Address

Name

E-mail Address

Name

E-mail Address

Name

E-mail Address

Please indicate any holidays your firm observes including days before or after major holidays that you may be closed or close early.

_____	_____
_____	_____
_____	_____
_____	_____

Name & Title of person completing this form: _____

Date: _____

*****If more space is required for any of the above fields, please attach a separate page. Thank you.*****