

**HIGHLAND POINTE, LLC
TENANT CONTACT SHEET**

TENANT COMPANY NAME: _____

DAY TO DAY CONTACT PERSON: _____

DAY TO DAY CONTACT E-MAIL ADDRESS: _____

BUILDING ADDRESS: _____ SUITE #: _____

TELEPHONE NUMBER: _____ FAX #: _____

NUMBER OF EMPLOYEES: _____ TAX ID # _____

AFTER HOURS EMERGENCY CONTACT PERSON: _____

EMERGENCY CONTACT TELEPHONE NUMBER: _____

BILLING CONTACT PERSON: (INVOICES/RENTAL /TAX & OPERATING ESCALATION)

BILLING CONTACT E-MAIL ADDRESS: _____

BILLING ADDRESS: _____

TELEPHONE NUMBER: _____ FAX #: _____