## Kennedy Wilson

## Tenant Contact & Authorized Signatures Form 150 S. El Camino Drive, Beverly Hills, CA 90212

Tenant Name: Main Contact: Primary Phone:			Suite Number: Main Contact Title: Primary Email:								
						Building and/or remove property	Suite Access and Pro	operty Remov	al: (Authorized to g	grant access to y	our suite and
						Print 1.	t Name	2	act Number	3.	Email
1.		2.		3.							
Billable Service etc.)	<b>s:</b> (Authorized to sign f	or any billable	services, such as l	key copies, over	time H.V.A.C.,						
Print 1.	t Name	Conta 2.	act Number	3.	Email						
1.		2.		3.							
Emergency	Contact: (Individuals to	be called in c	ase of an emergen	cy during non-bl	usiness hours)						
Prin 1.	t Name	Conta	ct Numbers								
				(Primary C	contact Number)						
2.	-			(Alternate	Contact Number)						
				(Primary C	contact Number)						
3.	-			(Alternate	Contact Number)						
				(Primary C	contact Number)						
	-			(Alternate	Contact Number)						
gnature:			Date:								
rint Name:			Title:								