



**180 NORTH LASALLE  
TENANT INFORMATION SHEET**

**General Information**

Tenant Name: \_\_\_\_\_

Suite Number: \_\_\_\_\_

*(If Applicable)*

Sub-tenant Of: \_\_\_\_\_ Leasing To: \_\_\_\_\_

Description of Business: \_\_\_\_\_

Main Phone: \_\_\_\_\_ Main Fax: \_\_\_\_\_

**Main Office Contact**

*The name and contact information of the person who is the main contact with the Office of the Building. This person is also designated to receive and distribute the tenant news emails.*

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Alternate Contact: \_\_\_\_\_ Title: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**Executive Office Contact**

*The name and contact information of the person that would make executive decisions.*

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**Authorized Personnel**

*The names, phone numbers and signatures of persons authorized to order billable work done, maintain key control and authorize visitor entry.*

Name:	Phone Number:	Signature:
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____



**Emergency Contacts**

*The names and after-hour phone numbers of persons to be contacted in case of an emergency or other after-hour issue.*

Name:	Home Phone:	Cellular Phone:	Alternate Email
_____	_____	_____	_____
_____	_____	_____	_____

**IT Contact Information**

*The names and phone numbers of persons to be contacts in case of IT issues.*

Name: _____	E-mail Address: _____
Phone Number: _____	Cellular Phone: _____

**Rent Statements**

*The name and contact information of the person to be notified of rent increases and billing adjustments.*

Name: _____	E-mail Address: _____
Phone Number: _____	Mailing Address: _____

**Occupants**

*In order to plan for tenant appreciation events and for emergency planning please provide occupant information.*

Total number of Occupants: \_\_\_\_\_

Occupants During Day: \_\_\_\_\_                      Occupants During Night: \_\_\_\_\_

*If you occupy more than one floor please specify occupants per floor*

Day:	Night:
Occupants on Floor # ____ : _____	Occupants on Floor # ____ : _____
Occupants on Floor # ____ : _____	Occupants on Floor # ____ : _____
Occupants on Floor # ____ : _____	Occupants on Floor # ____ : _____

Equipment that under no circumstances should be touched by building personnel or cleaning staff: (Please list equipment & location)

\_\_\_\_\_

Are there any hazardous materials kept in your suite or storage area?  
If yes, please list the material, its purpose, and its location.

\_\_\_\_\_



180 North LaSalle  
**PROPERTY REMOVAL AUTHORIZATION**

**COMPANY:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

*Please list below the people who are authorized to sign Package Removal Passes.*

**EMPLOYEE**

**SIGNATURE**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**180 North LaSalle**  
**Fire/ Life Safety Information**

Tenant Name: \_\_\_\_\_ Suite No: \_\_\_\_\_

Head Safety Coordinator/Fire Warden: \_\_\_\_\_

Name: \_\_\_\_\_ Office Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Assistant Fire Warden: \_\_\_\_\_

Name: \_\_\_\_\_ Office Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Alternate Name: \_\_\_\_\_

Searcher (s)

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Stairwell Monitor (s)

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Alternate: \_\_\_\_\_

Alternate: \_\_\_\_\_

Elevator Monitor

Name: \_\_\_\_\_

Alternate: \_\_\_\_\_



*Please list employees needing assistance and names of the aides who will assist them to the stairwell in case of an evacuation if necessary.*

Employee  
Name: \_\_\_\_\_ Aides: \_\_\_\_\_

Employee  
Name: \_\_\_\_\_ Aides: \_\_\_\_\_

**Please return the completed form to the Office of the Building in Suite 2210 or email to [Terrah.stewart@am.jll.com](mailto:Terrah.stewart@am.jll.com) as soon as possible.**

*Please remember to keep this sheet up-to-date at all times. This information is consistently used by the Office of the Building and is necessary to keep all tenants properly informed. As a tenant, it is your responsibility to provide us with any updates. Remember to update your security listings as well. For help, please call the Office of the Building at (312) 827-7800.*

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**Tenant Information Sheet Completed By:** \_\_\_\_\_ **Date:** \_\_\_\_\_