

BUILDING : 1400 K Street NW

TENANT NAME : _____ **SUITE NO. :** _____

"Live Safe" Emergency Alert System Contacts (minimum of three (3))

Contact Name/Title	Room #	Email Address	Office Phone	Cell Phone	Other

Fire Wardens (Please refer to the Tenant Emergency Action Plan for requirements)

Contact Name/Title	Room #	Email Address	Office Phone	Cell Phone	Other

Individuals Requiring Assistance

Contact Name/Title	Room #/Location	Form of Disability	Office Phone	Cell Phone	Helper

Tenant Evacuation Place

During an evacuation, tenants are not permitted to congregate directly in front of or immediately around the building. Each tenant should designate a meeting point for personnel a safe distance away from the emergency.

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It is the responsibility of each tenant to keep a fully updated contact form on file with the Management Office in the event of an emergency.