**Please complete form and either fax to 604-971-0209 or scan to** **info@simplyoffice.ca**

**COMPANY INFORMATION:**

|  |
| --- |
| **Company Name:** |
| **Current Address:** |
| **Business Type:** |
| **Website Address: Email Address:** |
| **Telephone Number: Fax Number:**  |

**TENANT INFORMATION:** **Waterfront [ ]  Harbourfront [ ]  Canada Place [ ]**

|  |
| --- |
| **Full Name: Email Address:** |
| **Telephone Number: Cell Number:**  |
| **Full Name: Email Address:** |
| **Telephone Number: Cell Number:**  |

**DETAILS OF ADDITIONAL OFFICE EMPLOYEES/ASSOCIATES:**

|  |
| --- |
| **Full Name: Email Address:** |
| **Telephone Number: Cell Number:**  |
| **Full Name: Email Address:** |
| **Telephone Number: Cell Number:**  |

|  |  |  |  |  |
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| --- | --- | --- | --- |
| **Signature** |  | **Date** |  |

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