



TENANT INFORMATION

PROPERTY INFORMATION

Address of Property:

Tenancy Number:

BUSINESS INFORMATION

Company Name:

Postal Address:

ABN Number:

Is this ABN Registered for GST? YES NO

BILLING INFORMATION

Company Name:

Postal Address:

Phone Number:

Email:

Attention: Role or Title:

Would you prefer Email or Postage? Email Postage

MAIN CONTACT INFORMATION

First Name: Surname:

Role or Title:

Phone Number (Business):

Mobile:

Email:

ONSITE PERSONNEL OR MANAGER INFORMATION

First Name: Surname:

Role or Title:

Phone Number (Business):

Mobile:

Email:



ALTERNATIVE CONTACT INFORMATION

First Name:

Surname:

Role or Title:

Phone Number (Business):

Mobile:

Email:

EMERGENCY CONTACT INFORMATION

First Name:

Surname:

Role or Title:

Phone Number (Business):

Mobile:

Relationship:

Please return the form by email to:
elke@roskelcommercial.com or michelle@roskelcommercial.com