

**2500 LAKEVIEW ASSOCIATION
EMERGENCY INFORMATION**

Name: _____ Unit #: _____

Home Phone: _____ Business Phone: _____

Business Address: _____

Mailing Address (if different from above): _____

The following person(s) would know where to contact me or could be called in case of need or emergency:

Name: _____ Name: _____

Address: _____ Address: _____

Phone: _____ Phone: _____

Business Phone: _____ Business Phone: _____

TENANT INFORMATION

If your unit is occupied by a tenant or person(s) other than yourself, please complete the tenant information below:

Name: _____ Home Phone: _____

Business Address: _____ Business Phone: _____

The following person(s) would know where to contact the tenant or could be called in case of need or emergency:

Name: _____ Name: _____

Address: _____ Address: _____

Phone: _____ Phone: _____

Relationship: _____ Relationship: _____

OTHER

Locker #: _____ Parking Space # _____ Bike Sticker # _____

Identify any dogs or Cats: Name: _____ Dog or cat _____ Kind _____ Color _____

Do you have any special needs or need help in case of emergency evacuation - please state below:

Please return this completed form to:

Eileen Tardy, Building Manager
2500 Lakeview Association
Building Office
2500 N. Lakeview
Chicago, Illinois 60614

YOU MAY ALSO FAX IT TO THE BUILDING AT (773)525-2573 OR EMAIL IT TO ME AT etardv@2500lakeview.com.