

*If you rent your Unit please ensure a completed copy of the Tenant Resident Information Record is additionally provided*

<b>TENANT RESIDENT INFORMATION RECORD</b>
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**Building Name:** \_\_\_\_\_

**Suite Number:** \_\_\_\_\_ **Parking Number (if applicable):** \_\_\_\_\_

**Tenant Name(s):** \_\_\_\_\_

\_\_\_\_\_  
*(Please list all occupants in the event of a building emergency)*

**Phone | home:** \_\_\_\_\_ **cell:** \_\_\_\_\_ **work:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Emergency contact information for tenant(s):**

Name	Relationship	Phone Number

**Vehicle Information:**

\_\_\_\_\_  
*(Make, Model & License Plate No.)*

**Is special assistance required in an evacuation?**                      **YES**                      **NO**

**If YES, please state your needs:** \_\_\_\_\_  
*(Wheelchair, walker, oxygen etc)*

I understand that the information in this document will be used by the General Manager, Community Administrator, and the Board of Directors. Any relevant information may be given to contractors and/or emergency personnel to assist in the coordination of repairs or in the event of an emergency.

In accordance with the Freedom of Information and Protection of Privacy Act I consent to this use of the information provided.

By providing a completed copy of this form to the Unit owner and/or Gateway South Centre I acknowledge my understanding and consent of the above statements.

**The Unit Owner is required to provide a copy of this form to Gateway South Centre behalf of the tenant. The form can be sent by email to [admin@gatewaysouthcentre.com](mailto:admin@gatewaysouthcentre.com) or send by mail to: Gateway South Centre, 11811 Lake Fraser Drive SE Calgary, Alberta, T2J 7J4**