

New Tenant Emergency Contact Information Template

Please complete this form with accurate information. This document will be kept on file in case of an emergency.

Tenant Information

Tenant Full Name:

Building Address:

Unit/Apartment Number:

Phone Number:

Email Address:

Primary Emergency Contact

Full Name:

Relationship to Tenant:

Primary Phone Number:

Alternative Phone Number:

Email Address:

Home Address:

Secondary Emergency Contact

Full Name:

Relationship to Tenant:

Primary Phone Number:

Alternative Phone Number:

Email Address:

Home Address:

Medical and Special Instructions (Optional)

Please list any critical medical conditions, allergies, or special instructions first responders should be aware of:

Instructions/Alerts 1:

Instructions/Alerts 2:

Authorization and Signature

I confirm that the information provided above is accurate and complete. I authorize the landlord or property management to contact the individuals listed above in the event of an emergency.

Tenant Signature (Print Name to Sign):

Date: