



**TENANT INFORMATION FORM**

Tenant Name: \_\_\_\_\_

Unit Address: \_\_\_\_\_

Phone: (h) \_\_\_\_\_ (w) \_\_\_\_\_ (c) \_\_\_\_\_

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

Names of all Persons Residing in the Unit: \_\_\_\_\_

Lease Start Date: \_\_\_\_\_ Lease End Date: \_\_\_\_\_

**Emergency Contact Information**

Emergency Contact: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone: (h) \_\_\_\_\_ (w) \_\_\_\_\_ (c) \_\_\_\_\_

**Owner/Agent Information**

Owner/Agent Name: \_\_\_\_\_

Address \_\_\_\_\_

Phone: (h) \_\_\_\_\_ (w) \_\_\_\_\_ (c) \_\_\_\_\_

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

**\*The information on this form is for office use only and will be held in strictest confidence.**

**Please return completed form to The Select Group at the address or fax number below**

**or email it to [jstrickland@theselectgroup.us](mailto:jstrickland@theselectgroup.us)**