

ALARM CODE REQUEST

We would appreciate your cooperation in providing the information requested below. Having this information on file will greatly assist us in providing you with prompt, professional management.

TENANT INFORMATION

Tenant Name: _____ Suite Number: _____

ALARM INFORMATION

Do you have an alarm? Yes No

Alarm Code: _____

Alarm Company: _____

Alarm Company Telephone: _____

Information provided to us will be kept confidential. We will only use the alarm code in the case of a building emergency requiring access to the tenant's space and are unable to notify the tenant in advance. If you choose not to supply us with the alarm code, in the event of an emergency we will be required to enter your space by any means necessary. If we are required to enter your space due to a building emergency we will promptly notify you of the situation. Please sign below that you understand and acknowledge these terms.

Signature: _____

Print Name: _____

Date: _____

In the event you should have any changes to the above information, please keep the Management Office informed. Thank you for your prompt attention to this request.

Vine & Elliott LLC

Please return via fax 206.443.5636, email to info@vinestreetstorage.com, or US Mail to 11 Vine Street, Suite A Seattle, WA 98121