MILLBROOK

5215 Old Orchard Road
Skokie, IL 60077

TENANT CONTACT FORM

Company: _____ Billing Address: _____

Suite: _____ _____

Phone: _____ _____

Fax: _____ Number of Employees: _____

	Name	Phone	Email
Main Contact:			
Accounting:			
CEO/President:			
Emergency Contact #1:			
Emergency Contact #2:			
Fire Warden:			
Other_____:			

Additional Information:

**** Please submit this form with your most recent COI to Skokie@Millbrookrec.com ****