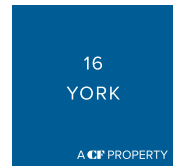


CLIENT CONTACT FORM



EMAIL FORM TO: 16yorkstreetsservice@cadillacfairview.com

BUSINESS NAME _____

ADDRESS _____

_____ SUITE/PO BOX _____

TELEPHONE _____

NATURE OF BUSINESS _____

CORPORATE WEBSITE _____

DAILY OFFICE CONTACTS (i.e. Facility Manager, Office Manager, V.P. Administration, etc.)
Note: Please ensure at least of the listed contacts has network oversight (i.e. Director IT, Workplace Operations, etc.)

NAME _____ TITLE _____

TELEPHONE _____ EMAIL _____

NAME _____ TITLE _____

TELEPHONE _____ EMAIL _____

NAME _____ TITLE _____

TELEPHONE _____ EMAIL _____

NAME _____ TITLE _____

TELEPHONE _____ EMAIL _____

SENIOR EXECUTIVE CONTACT (President, CEO, Managing Director, etc.)

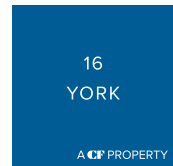
NAME _____ TITLE _____

TELEPHONE _____ EMAIL _____

SECURITY/LIFE SAFETY CONTACTS (Passcard Authorization Forms, etc.)

AUTHORIZED SIGNATORIES – NAME	TELEPHONE	SIGNATURE
1 _____	_____	_____
2 _____	_____	_____
3 _____	_____	_____

CLIENT CONTACT FORM (CONT'D)



AFTER-HOURS EMERGENCY CONTACTS.
NOTE: A Minimum of three contacts are required. Please ensure at least one of the contacts is available to respond afterhours at all times.

NAME	RESIDENTIAL TELEPHONE
1 _____	_____
2 _____	_____
3 _____	_____

MASS NOTIFICATION SYSTEM CONTACTS (if applicable)

1 NAME _____	2 NAME _____
WORK TELEPHONE _____	WORK TELEPHONE _____
HOME TELEPHONE _____	HOME TELEPHONE _____
CELL _____	CELL _____
EMAIL _____	EMAIL _____
3 NAME _____	4 NAME _____
WORK TELEPHONE _____	WORK TELEPHONE _____
HOME TELEPHONE _____	HOME TELEPHONE _____
CELL _____	CELL _____
EMAIL _____	EMAIL _____

EVACUATION WARDENS

1 _____	5 _____
2 _____	6 _____
3 _____	7 _____
4 _____	8 _____

COMPLETED BY:

NAME: _____ DATE: _____

UPDATE AUDIT: To ensure the validity of the information provided – this form must be updated on a quarterly basis. If there are no changes, please date and sign below.

NO CHANGES. REVIEW DATE: _____ REVIEWED BY: _____

Your privacy is very important to us. Personal information collected from you will only be used in emergency incidents or where verification is required for situations including premises access, and will remain confidential to The Cadillac Fairview Corporation Limited and its affiliates ("Cadillac Fairview"). It will however be disclosed to any entity that acquires Cadillac Fairview provided such entity similarly agrees to protect your privacy. If you wish to have a copy of Cadillac Fairview's privacy policy, or have a privacy question or concern, you may contact Cadillac Fairview's Chief Privacy Officer in writing at the following address: The Cadillac Fairview Corporation Limited, Suite 500, 20 Queen Street West, Toronto, Ontario M5H 3R4