**Douglas**

**Emmett Form CT-02 Gateway Los Angeles**

*To provide us with information about the individuals you have authorized for various purposes, please complete this form, have an authorized person sign it and return it to the Office of the Building.*

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| **Tenant Name:** |  | **Contact Phone** *#:* |
| **Suite No.:** |  | **Date:** |

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| THE FOLLOWING PERSONS ARE DESIGNATED TO ACT ON BEHALF OF THE TENANT AS SPECIFIED BELOW: |
| **Name** | **Title** | **Phone** | **Cell** | **Email** |
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| D Order billable services and access cards D Lease related matters D Emergency contact D Accounting/Billing Dother  |
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| D Order billable services and access cards D Lease related matters D Emergency contact D Accounting/Billing Oother  |

If you need more space, please add additional copies of this form.

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| **Tenant Authorized Person:** | Signature: |  |
| Type/print name & title: |  |

***Please remember to inform us promptly if there are any changes.***

If you have any questions, please contact the Office of the Building:

Phone: 310-826-2587 Fax: 310-820-7472 Email: gla@douglasemmett.com

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**Revised 03/13**