

RAINIER MANAGEMENT, LTD
Contact Information

In order to provide A+service we would like a few details from you. Please complete the following information and return this sheet with your Move-In Inventory or your Renewal. Thank you for your time.

Community: _____ Apartment #: _____

Animals in home? YES NO

Resident Name: _____	Resident Name: _____
Home Number: _____	Home Number: _____
Work Number: _____	Work Number: _____
Cell Phone number: _____	Cell Phone number: _____
E-Mail: _____	E-Mail: _____
Make, Model & License Plate of Vehicle: _____	Make, Model & License Plate of Vehicle: _____

Emergency Contact	
Name: _____	Name: _____
Phone Number: _____	Phone Number: _____
Relationship: _____	Relationship: _____

Resident Name: _____	Resident Name: _____
Home Number: _____	Home Number: _____
Work Number: _____	Work Number: _____
Cell Phone Number: _____	Cell Phone Number: _____
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