



It is vital that White Fir Properties is able to contact tenants in the event of an emergency. Please return the completed form to our office with your next month's rent. If you have any questions please feel free to contact us.

Primary Resident

NAME: _____

FIRST MIDDLE LAST

E-mail(s): _____

Home phone # _____ Work phone # _____

Cell phone # _____ Other Phone # _____

Birthday _____

Employer or Income Source _____

Employment address: _____

Emergency Contact Name & Phone: _____

Vehicle: Make/Model _____ Color _____ License Plate _____

Other Resident

NAME: _____

FIRST MIDDLE LAST

E-mail(s): _____

Home phone # _____ Work phone # _____

Cell phone # _____ Other Phone # _____

Birthday _____

Employer or Income Source _____

Employment address: _____

Emergency Contact Name & Phone: _____

Vehicle: Make/Model _____ Color _____ License Plate _____

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