## **Move-Out Information Sheet**

Please complete and return to CBRE approximately 30 days prior to lease expiration.

|  | Tenant Information   |
|--|--|
| Tenant Name:   |  |
| Building Name:   |  |
| Suite Number:  |  |
| Contact Name:  |  |
| Current Phone  |  |
| Number:  |  |
| Forwarding Address:  |  |
| New Phone Number:  |  |
| Move-Out Date:   |  |
|  |  |
|  | Moving Company Information   |
| Company Name:  | Woving company information   |
| Company Address:   |  |
| Company Contact:   |  |
| Company Phone Number   | er:  |
| 7  | L  |
|  |  |
|  | ted moving company submit a current Certificate of Insurance with    |
| the appropriate Certificat   | e Holder and Additional Insureds Information to CBRE prior to the    |
| move. Please see the Ven   | ndor COI Requirements form for insurance requirements.               |
| Diagrament us to requi   | act the use of the building's leading deal, and freight elevator for |
| •  | est the use of the building's loading dock and freight elevator for  |
| · ·  | se note that moving out of the building must occur after-hours       |
| (Monday through Friday after 5pm) and may not occur during normal business hours. If it is |  |
| •  | the weekend, special arrangements must be made with CBRE in          |
| advance.   |  |
|  |  |
|  |  |
| Thank you for your cooperation.  |  |
|  |  |
|  |  |
| CBRE   |  |

As Property Manager