



Tenant Information Form

MARSTON BEACON HILL 115 CHARLES ST BOSTON, MA 02114 T.617.212.3335 WWW.MARSTONBEACONHILL.COM

Address _____ **Date** _____

Marston Beacon Hill is required to keep up-to-date contact information for all residents. Information in the shaded area is required. All information will be kept strictly confidential.

Resident Information (Required)

Please list the name of each resident below.

	Name	E-mail	Home Phone	Work Phone	Cell Phone
Resident					
Resident					
Resident					
Resident					

In Case of Emergency

Contact Name _____

Home Phone _____ Cell Phone _____

Lease start date: _____ Lease end date: _____

Pets

Do you have any pets? YES NO

Type and description _____

Notes/comments: _____