



TRIBAL COMMUNITY  
DEVELOPMENT

# TENANT EMERGENCY CONTACT INFORMATION FORM

I \_\_\_\_\_ (Tenant)

list the below individual as my emergency contact:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Emergency Phone: \_\_\_\_\_

I will advise the Housing Department if I choose to revise the contact information noted above and am aware this information will be updated on a yearly basis at time of lease renewal.

\_\_\_\_\_  
Tenant (Print)

\_\_\_\_\_  
(Sign)

\_\_\_\_\_  
Address

\_\_\_\_\_  
City                      State                      Zip

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Voyager Resident ID #

\*Form added to Tenant's file and attached to Voyager Resident Screen with Emergency Contact Information entered on the Other Info Tab.