

THE PARK SQUARE BUILDING

31 St. James Avenue

Boston, MA 02116

SAFETY WARDENS

TENANT NAME: _____

SUITE #: _____ **PHONE NUMBER(S)** _____

SAFETY WARDEN and THEIR PHONE NUMBER(S), include mobile and office:

ALTERNATE SAFETY WARDEN and THEIR PHONE NUMBER(S), include mobile and office:

ASSISTANT SAFETY WARDEN(S) and THEIR PHONE NUMBER(S), include mobile and office:

1. _____

2. _____

ALTERNATE(S) and THEIR PHONE NUMBER(S), include mobile and office:

1. _____

2. _____

SEARCHERS (2 per Tenant) and THEIR PHONE NUMBERS, mobile and office:

1. _____

2. _____

Tenant Safe Gathering Location: 1. _____