

## 300 West 23<sup>rd</sup> Street Residents Know Your Neighbor Information Sheet (Confidential)

Please print clearly	Date:
Apartment Number:	Best Contact Telephone Number: ( )
Primary Resident Name (s):	Other Resident Name (s) :
Primary Resident's Work Telephone Number:  ( )	Best Telephone Number for Other Resident:  ( )
Resident Email Address:	Other Resident Email Address:
Emergency Contact Name:	Emergency Telephone Number: ( )
Provide a list of personnel who have routine access to unit (e.g. apartment cleaners, child/health care worker, dog walker, other pet care):	
Provide a list of special needs (e.g. physical, mobility, hearing, vision, dietary, etc):	
Pet (s): YES NO Type:	Pet Name (s):

Also, please notify the Know Your Neighbor committee during the course of the year to update any information, if necessary. This questionnaire will be available to download under the Know Your Neighbor button on the home page of the building website at www.300w23coop.com.