

Sauk Trail Storage

Inside Storage Rental Application

Date Of Occupancy _____ Size _____ Deposit _____
Length of Occupancy _____

The monthly rent shall be \$ _____ per month payable in advance.

A *non-refundable* application fee of \$10.00 is due with this application.

APPLICANT INFORMATION: (required information please print)

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

E-Mail: _____ Drivers License #: _____

Home Phone: _____ Work Phone: _____

Employers Name: _____

Employers Address: _____ City _____ State _____ Zip _____

Alternate Name _____ Address _____

City _____ State _____ Zip _____ Phone _____

(for additional notices, late letters, etc.)

Optional Information

How did you hear about Sauk Trail Storage? (for our marketing records)

Yellow Pages _____ Drive by _____ Referral _____ Previous Occupant _____ Internet _____ Newspaper ad _____ Other _____

What prompted your to store with Sauk Trail Storage? Location _____ Convenience _____ Easy Access _____ Security _____
Features _____ Price _____ Hours _____ Other _____

What are you storing? Furniture/Household _____ Business Inventory _____ Business Records _____ Retail Merchandise _____
Auto _____ Boat _____ Snowmobile/Jet Ski, etc. _____ Other _____

Gate Access Code: _____ (customers choice - numbers only)

The information provided in this application is true and correct to the best of my knowledge. Sauk Trail Storage is authorized to verify employment and other information in this application.

Applicant's Signature

Date