

Storage Occupant Information

Remington Storage: Best Secured Storage: Unit Number: _____

Have you rented a storage space from Remington or Best Secured before? No:

Personal Information

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Phone: _____

Driver's License #: _____ State: _____ Social Security #: _____

E-Mail Address: _____

Work Information

Employer: _____

Address: _____

City: _____ State: _____ Zip: _____

Work Phone: _____ Work Title: _____

Emergency Contact

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Phone: _____

Persons Authorized for Access

Name: _____ Name: _____

Name: _____ Name: _____

This application is a binding legal document when signed. Please read carefully. Before submitting this application, you may take a copy of these documents to review and/or consult an attorney. You are entitled to a copy of this agreement after it is fully signed. Please submit to 325 EAST BOXELDER RD #101, GILLETTE, WY 82718.

Occupant Signature

Date