



New Tenant Questionnaire

Tenant's Name: _____

Business Name (if applicable): _____

Mailing Address: _____

City, State & Zip: _____

Phone Number: _____ Do You Have Another Unit With Us (if so, what unit#)? _____

E-Mail Address: _____

Driver License No: _____ State: _____ Exp: _____

Alternate Contact's Name: _____

Mailing Address: _____

City, State & Zip: _____

Phone Number: _____

E-Mail Address: _____

How Did You Find Us (please be specific)? _____

Will You Be Storing A, Boat, RV or Motorized Vehicle(if so, please describe)?

What type of items will you be storing? _____

Is there a third party with a secured interest in the property being stored? _____

(If so, what is there name, address and phone number) _____

What is the estimated value of the property being stored (for insurance claims)? _____