

## EZ-Storage Leasing Information

**Name \***

First Name:

Last Name:

**Address:\***

Street Address:

City:

State:

Zip Code:

Home Phone:

Cell Phone:

Work Phone:

**Drivers License #:**

**Email:** (email shall be an accepted means of notifications)

**Employer:**

**Address:\***

Street Address:

City:

State:

Zip Code:

**EMERGENCY CONTACT.** Pursuant to Section 704.90, Wis. Stats., every rental agreement allows the tenant to specify the name and last-known address of a person who, in addition to the tenant, the landlord is required to notify under Section 704.90(5)(b)(1), Wis. Stats. (A complete copy of Section 704.90, Wis. Stats., is available upon request from the operator.) Please select one (1) of the following:

**I DO NOT WISH TO LIST AN EMERGENCY CONTACT**

**I WISH TO LIST AN EMERGENCY CONTACT AS DETAILED BELOW (AT A DIFFERENT ADDRESS)**

**Name \***

First Name:

Last Name:

**Address:\***

Street Address:

City:

State:

Zip Code:

What size storage unit do you need?

Do you want climate controlled storage?

How long do you intend to rent?

Are you on active military duty?

Brief description of property that you will be storing:

Which location will you be renting at?

Do you have insurance for your self storage unit?

Access Code: Please list 4 digit code that you would like for gate access:

Do you have a credit card or checking account that we can automatically debit on the 1<sup>st</sup> of each month?

How can we get the lease to you?

How can we get the lock for the unit to you?

When do you want to start renting the unit(s)?

Tenant Signature:

Please help us in serving our customers by letting us know how you heard about us: