

KEYSTONE HEIGHTS SELF STORAGE, LLC
P.O. BOX 1505
7838 SUNRISE BLVD
KEYSTONE HEIGHTS, FL. 32656
352-473-7683

UNIT # _____

CUSTOMER SIGN UP FORM

1. CUSTOMER **** (This is the address that will be used to send all legal notices)

First Name _____ Middle Initial _____ Last Name _____

Street Address _____

City _____ State _____ Zip _____

Home Phone _____ - _____ - _____ Cell Phone _____ - _____ - _____

Email Address: _____

Drivers Lic State _____ DL # _____

Date of Birth ____/____/____ Social Security Number ____/____/____

2. Alternate Contact

First Name _____ Last Name _____

Phone _____ - _____ - _____

3. Employer Information

Employer Name _____

Work Phone _____ - _____ - _____

4. We DO NOT send Invoices. The rent is due on the FIRST of each month.

***THERE IS A SEPARATE FORM FOR CREDIT CARD AUTO PAY MONTHLY OPTION, JUST ASK.

5. You must remove the lock when you move out! IF THE LOCK IS ON THE UNIT YOU ARE IN IT!!!

6. Are there any liens on the property you will be storing? NO ____ YES ____

If YES, who is the lien holder? _____

***** There will be a \$35.00 NSF FEE applied to all returned checks *****

SIGNATURE

DATE