

Self Storage Intake Application

First Name _____ Middle Initial _____ Last Name _____

Address _____

City _____ State _____ Postal Code _____

Company Name (if applicable) _____

Phone _____ Mobile or Landline (please circle one)

Mobile _____ Secondary _____

Email _____

Gate Code (7 digits) _____ (may not start with "0", all the same, sequential, or a pattern)

Driver's License _____ License State _____

SSN _____ (you will be asked to enter your full social security number into the computer yourself if only last 4 are written on application)

Date of Birth _____

Will you be using the storage space for Residential or Commercial storage? _____

Alternate Contact

First Name _____ Middle Initial _____ Last Name _____

Address _____

City _____ State _____ Postal Code _____

Phone _____ Mobile or Landline (please circle one)

Email _____

Relationship _____

I understand the information contained on this Intake Application will be used to establish my account and rental agreement for services provided by Cascade Weekender RV Storage. I understand the information collected by Cascade Weekender RV Storage at the time of the account establishment and rental agreement completion is never sold. I understand I am providing the information above in order to allow Cascade Weekender RV Storage to provide service to me on my behalf. The information may be used for the purpose of verification of authority for account purposes and authority to enter protected areas, including protected areas of our website and our Cascade Weekender RV Storage app. I understand this Intake Application will become part of the rental agreement once signed.

Signature of Occupant _____ Date _____

Reverification of Information: - OFFICE USE ONLY

Signature of Occupant _____ Date _____

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