



Please complete ALL fields for the required Rental Agreement information. PLEASE PRINT.

1) PRIMARY - Your personal information; you will be responsible for the unit.

NAME: ADDRESS: CITY / STATE / ZIP: PHONE #: HOME MOBILE EMAIL*: DRIVER'S LIC. #: SOCIAL SEC. #: STATE: BIRTH DATE:

2) WORK - Your current employment information.

EMPLOYER: ADDRESS: CITY / STATE / ZIP: PHONE #:

3) ALTERNATE - Someone else who we may contact if we cannot reach you; MUST have different contact information.

NAME: RELATION: ADDRESS: CITY / STATE / ZIP: PHONE #: EMAIL:

4) ACCESS CODE - Choose numerical digits for your access code to enter/exit Hardy's Self Storage.

5) MARKETING QUESTIONS - Help us learn about you. PLEASE CIRCLE.

How many facilities did you contact? 0 1 2 3 4 5 Have you used self storage previously? YES NO Miles from this facility? 0-2 2-3 3-5 5-10 10+ Where do you reside? APT. HOUSE MIL. BASE SENIOR CTR. STUDENT HOUSING How did you hear about us? What are you storing? Your reason for storing? Why did you choose this facility?

*By electing to provide your email address, you agree that notices by Hardy's Self Storage may be provided to you via email.