

OVERTON BOAT & RV STORAGE, LLC

office use only
UNIT#
CODE

CIRCLE FACILITY TYPE
Enclosed / Open / Shaded / Container

Renter: _____ Commencement Date: _____

Driver's License State & # _____ Last 4 #s of SSAN: _____

Mailing Address
Street: _____
City: _____ State _____

Residence Address (NO P.O. BOXES)
Street: _____
City: _____ State _____

Residence Phone: _____ Cell Phone: _____
Business Phone: _____ Fax Number: _____

Description of Property being stored: RV _____ Boat _____ Trailer _____ Other _____

Year: _____ Make: _____ Model/Type _____ Color: _____

Size: _____ Serial/Vin#: _____

Registration State: _____ License Plate#: _____

*for additional items, please list on separate page.

In Case of Emergency, if you cannot be contacted, please provide name and phone number of person you wish us to contact:
Name: _____ Relationship: _____ Phone#: _____

ANY CHANGES AFFECTING THE ABOVE SHALL BE REPORTED TO THE OFFICE IMMEDIATELY

(Check One) ___ Annual ___ Monthly	Initial Payment	Monthly Payment
Storage Rental	_____	_____
Prorated portion of Monthly Rental (2nd month only)	_____	N/A
Deposit	_____	N/A
Other Charges	_____	_____
Taxes	_____	_____
Due upon execution	_____	_____

Overton Boat & RV Storage reserves the right to change the storage rates at its sole discretion with thirty (30) days notification

initial _____ I understand that I am liable for all storage fees incurred until a checkout slip is obtained

initial _____ I understand that I must provide my own lock, keys and insurance for my property being stored, and that I cannot hold Overton Boat & RV Storage responsible for any loss or damage to my property during my rental agreement