

## CUSTOMER INFORMATION

|   |                         |
|---|-------------------------|
| Name  | Unit                    |
| Address   | Lease No.               |
| City                      State                      Zip  |                         |
| Home Phone                      Work Phone                |                         |
| Social Security #<br>XXX-XX-                              |                         |
| Place of Employment                                       |                         |
| <b>ALTERNATE CONTACT</b> (at address other than Lessee's) | Drivers Lic. #    State |
| Name  | Statement?              |
| Address   |                         |
| City                      State                      Zip  |                         |
| Home Phone                      Work Phone                |                         |
| Person(s) with Authorized Access                          |                         |
| 1.  |                         |
| 2.  |                         |

### HOW DID YOU LEARN ABOUT US?

Web Site                       Drive By                       Friend  
 Direct Mailer                       Yellow Pages                       Manager  
 Chamber of Commerce                       Other \_\_\_\_\_

### WHICH FEATURE(S) MOST INFLUENCED YOUR DECISION TO CHOOSE US?

Location                       Unit Size  
 Price                       Security  
 Appearance                       Manager's Presentation

Additional services offered, in particular \_\_\_\_\_

Customer Signature \_\_\_\_\_ Date \_\_\_\_\_