

3013 N. Water St., Bay City, MI 48708 Phone: 989-894-4000 Fax: 989-894-4002 www.baycitystorage.com

RESERVATION FORM AND RECIEPT

Name:	Date:
Address:	City/State/Zip:
Telephone No:	Drivers Lic No:
We are reserving space for	you're:
Unit Size:	Deposit received: \$50.00.
· ·	past customer or a new one a deposit is required to place a computer system and guarantee your storage space.
Total storage fee: \$	Season* or \$Month*
* This is an estimate of rent	t only subject to verification of size of the unit. Therefore the
total rental fee may change.	
Your reserved space is for (chec	ek one):
☐ - Indoor Heated Stora	ge - Cold Indoor Storage
☐ - Covered storage bui	lding. — Outdoor Storage
later, you will be charged the prorated storage customers must pay at least for time used. Your \$50.00 deposit for your Please let us know a few days before you inside as soon as possible.	storage fee for that portion of the month(s) that you actually use. All winter the 6-month period of November 01 through April 30, regardless of actual our winter storage will be deducted from your total winter storage fees. You bring your unit in for winter storage so we can make arrangements to get it eriod Storage Options - Indoor Cold/Heated Only
	our total rent - 8 Month*storage 15% off your total rent
	ay at least for the 7 or 8 -month period, regardless of actual time used.
If you do not bring your unit is	n for storage by November 1st or make other arrangements with
	on will be cancelled and you will loose your deposit.
I understand that should I dec	cide not to store my unit, my \$50.00 deposit is non-refundable.
	Reservation in Computer
Customer Sign	<u> </u>

REV: 8/2013