RENTAL AGREEMENT

Carlyle Storage P.O. Box 172 | 17691 County Farm Road | Carlyle, IL 62231 (618) 844-0001

Name		Email ad	ldress _					
Address			_ City	ty State Zip _		Zip		
Phone Number			_ () Cell () Home () Work					
Alternate Phone Number				_ () Cell () Home () Work				
Driver's License Num	ber		_	State				
Description () Boat	()Camper ()R	V () Other			Lic. Plat	e No		
Year Ma	ake	Model		Color	Leng	thth incl. trailer, swim pla	feet atform, etc.	
Premium Individual Storage			-	0.00 per month 300.00 for Twelve (12) months, due at signing				
` '	et wide, Fourteen (14) fee pener. Additional availab	, ,	,	0 , .		, 0	(not included.) One	
Inside Storage		()	\$2.00 per	foot per month	ot per month # of Months Stored			
Group storage, in	and out requires three (3	3) days advance notice.	Summer sto	orage guarantees spot f	for winter.			
Premium Inside Storage		()	\$2.50 per foot per month		# of N	# of Months Stored		
Group storage, co	ncrete floor, in and out (May-October only), requ	ires three (3) days advance notice	. Summer storag	ge guarantees spo	ot for winter.	
Outside Storage		()	\$20.00 per month # of Months \$100.00 - Six (6) months, due at signing \$200.00 - Twelve (12) months, due at signing			Months Stored	t	
Minimum six mor Units stored outsi	nths. de must be kept neat in a			Jan Feb Mar Apr M ly attached and free fr	-		/ Dec	
Rental Amount Due Deposit Due				\$				
Total Due				\$				
OCCUPANT HAS REA					IS AND CON	NDITIONS. O	OCCUPANT HAS	
IN WITNESS WHERE written.	OF, the parties h	ereto have exec	uted thi	s RENTAL AGRE	EEMENT the	day and ye	ear first above	
Occupant:			On beha	lf of Owner:				
Occupant Signature			Carlyle S	torage LLC				
occupant signature			Bv.					
Occupant Name (Please Print)								
								

Date