

GRAYSTONE STORAGE STORAGE UNIT RENTAL APPLICATION

UNIT #: SIZE: MONTHLY RENT: \$

PERSONAL INFORMATION:

Applicant's Name:
Street Address:
Mailing Address:
City, State, Zip:
Email Address:
Primary Phone #:
Secondary Phone #:
SSN #: Only give over the phone. Do not email.

STORAGE SPACE RENTAL HISTORY:

Name of Storage Facility:
Storage Facility City, State
Dates of Tenancy:
Monthly rental amount:
Reason for leaving:

PLEASE DO NOT USE RELATIVES FOR REFERENCES

REFERENCE #1

Name:
Phone #:
Relationship:

REFERENCE #2

Name:
Phone #:
Relationship:

REFERENCE #3

Name:
Phone #:
Relationship:

STORED PROPERTY INFORMATION:

Description of goods to be stored:

By signing below, applicant gives Graystone Storage, LLC permission to perform a background check and acknowledges that the entire screening process may take up to two weeks.

Signature: _____ Date: _____

Return to:
Graystone Storage, LLC
1400 S Foothill Drive, Ste 34
Salt Lake City, Utah 84108
Email: michelle@gaddisinv.com Phone: 801 487 3236 x 1