

RAY WHITE REAL ESTATE GOULBURN STORAGE SHED APPLICATION

Suite 1, 42 Clifford Street
GOULBURN NSW 2580
Ph: (02) 48213788 Fax: (02) 48218320

SHED NO: _____

STORER DETAILS

Business Name: _____

Full Name: Mr/Mrs/Mr/Miss _____

Present Address: _____

New Address (if moving): _____

Phone Numbers: (H) _____

(W) _____

(M) _____

Fax Numbers: (H) _____ (W) _____

Drivers Licence Number: _____ License Expiry Date: _____

Email Address: _____

Occupation: _____

Empolyers Name: _____

Employers Address: _____

Employers Ph No: _____

Period of Emplyment: _____

Alternative Contact Person

Full Name: Mr/Mrs/Miss/Ms _____

Home Address: _____

Phone Numbers: (H) _____

(W) _____

(M) _____

Emergency Contact Person

Full Name: Mr/Mrs/Miss/Ms _____

Home Address: _____

Phone Numbers: (H) _____

(W) _____

(M) _____

(Please advise us immediately if your address or contact numbers or those of alternative contact person change).

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STORAGE DETAILS

Shed Number: _____

Storage Period From: _____

Storage Period To: _____

And then extend automatically until either party gives 7 days notice.

Storage Cost: \$ _____ per week

MAIN POINTS – the applicant ac

- All payments are to be made by you, the storer.
- Goods stored at your sole risk. **YOU** need to take out your own insurance cover – goods are not insured.
- The owner is not liable for any goods stored on the premises.
- You must **NOT** store any hazardous, illegal, stolen, perishable, environmentally harmful or explosive goods.
- 7 days notice must be given to terminate this agreement.
- The storer must notify the owner of all changes of address and contact telephone numbers immediately.
- If rent falls more than 4 weeks behind at any one time, then the Landlord has the right to take possession of the storage shed and sell the stored goods to recover the debt owed in unpaid rent for the storage unit.
- If you activate the alarm, you as the storer will be charged a \$50 fee upon each callout.
- If you accidentally lock yourself out or require a replacement key, a \$50 fee will be charged and payable.

I/we acknowledge that these matters have been drawn to my/our attention and that I/we am/are responsible to take out my/our own insurance coverage for the goods stored in my/our shed.

FULL SIGNATURE/S OF STORER/S: _____

DATE: _____

SHED NUMBER: _____