



Clean & Safe Mini Storage
830 Liebman Court
Green Bay, WI 54302
920-465-8490
Fax 920-465-8871
www.toonenproperties.com

Name: _____ DOB: _____ S.S # : _____

Name: _____ DOB: _____ S.S # : _____

Address: _____
Street City State Zip

Phone #: (____) _____ Email: _____

Contents to be stored: _____

Please list the name, address, and phone number of 2 contacts (18 years of age or older) in addition to yourself that you authorize to receive notice of your account, other than your spouse.

1. Name: _____ Phone #: _____

Address: _____
Street City State Zip

2. Name: _____ Phone #: _____

Address: _____
Street City State Zip

Contents to be stored: _____

Agreement

I have enclosed a \$10.00 non-refundable application fee for each applicant. I hereby authorize a credit report to be completed. I certify that all statements made above are true and correct. Falsification of the above information or omission of requested information shall be grounds for denial and/or if a lease agreement has been entered into, falsification or omission will be grounds for termination of the lease.

By signing below, I agree to the above stated terms.

Applicant Signature: _____ Date: _____

Applicant Signature: _____ Date: _____

Rental Agent: _____ Date: _____

FOR OFFICE USE ONLY

Unit Number: _____ Unit Size: _____

Amount of Rent: _____ Security Paid: _____

Pro-Rated Rent: _____ Application Fee: _____

Amount Due: _____ First Day of Lease Term: _____

Entered By: _____ Date: _____
