

163 Schoolhouse Street Coquitlam BC V3K 4X8 Tel: (604)521-3636 Fax: (604)527-4010 Email: info@bugetministorage.ca

CHANGE OF TENANT INFORMATION

OCCUPANT:

UNIT(S) #:

Please make the following changes pertaining to my Budget Mini Storage account. I understand that the Rental Agreement requires me to notify Budget Mini Storage in writing if there are any future changes in my account information given at the time of rental, and that any changes I request will not be completed until this form has been submitted to the Rental Office. (PLEASE PRINT)

CONTACT INFORMATION CHANGE NAME CHANGE:

ADDRESS:			
PHONE: Home	Cell		
LICENSE: ID#/ST		EXP. DATE	
EMPLOYER			
		PHONE:	
CONTACT:			
		PHONE:	
DTHERS WITH DWNERSHIP NTEREST:			
		PHONE:	
NIT INFORMATION CHANGE			
CCESS CODE:			
ADD TO ACCESS LIST:		REMOVE FROM ACCESS LIST:	
I certify the above changes make my acco	unt information current,	and all other unchanged information on	file is curre
Occupant's Signature		Date	
FACILITY:			