

ADDITIONAL SELF STORAGE, LLC

CHANGE OF TENANT INFORMATION FORM

(Please complete and return to the office you store your property with.)

Tenant Name: _____

Tenant Unit No. _____

Address: _____

Home Phone _____

Work Phone _____

Alternate Contact: _____

Home Phone _____

Address: _____

Work Phone _____

New Legal Name: _____

New 4-Digit Pass Code: _____

(To be sent any information by e-mail, or to check your account balance or pay online, please provide your e-mail address below. We will not sell or distribute your e-mail to anyone else.)

E-Mail Address: _____

Other

Tenant Signature

Date

(We can only accept these changes if signed by the tenant who signed the original rental agreement.)