



A Low Cost Self Storage

1600 Mabry St. Baytown, TX 77520

Office: 281-422-2445

Fax: 281-420-5950

Email: sales@alowcostss.com

Last Name:		First Name:	
-------------------	--	--------------------	--

Mailing Address:			
	<small>Street Address</small>	<small>City</small>	<small>State</small>
	<small>Zip Code</small>		

Email Address:	
-----------------------	--

Cell Phone Number:	
Home Phone Number:	
Additional Phone Number:	

License / ID Number:		EXP:		State:	
Active Duty Military: ()Yes () No		Branch / Base:			

Access People: Do you want to authorize family members or close friends to access your unit? If so, please list.		
First and Last Name:	Phone Number:	Relationship to Customer:

Emergency Contact: Someone who will know how to get in touch with you in the event that we cannot.		
First and Last Name:	Phone Number:	Relationship to Customer:

Items being stored (general description):	
Gate Pass Code (pick a 4 digit number):	
How did you hear about us?	

Signature:		Date:	
-------------------	--	--------------	--

Please email or fax (email address and fax number at top of this page) this form to us and we will soon have your lease ready for you to sign.

Thank you for choosing A Low Cost Self Storage, we look forward to serving you.