

Customer Sign up Form

West River Storage Suites

5720 Samrick Ave NE, PO Box 264, Belmont, MI 49306

(616) 647-3200 WRstorage@aol.com WWW.WRstorage.com Access code _____

(Choose 4- 10 digit)

1. Customer

First Name _____ Initial _____ Last Name _____

Company Name (If renting for your Business) _____

Street Address _____

City _____ State _____ Zip _____

Home _____ - _____ - _____ Cell _____ - _____ - _____ Work _____ - _____ - _____

Personal E-Mail _____

Driver's License # _____ Driver's License State _____ Birth Date _____

Your Vehicle Make & Model _____ Color _____ License Plate _____

Size needed 10x10 _____ 10x15 _____ 10x20 _____ 10x25 _____ 10x30 _____ Date of Move in _____

Reason for Rental _____

Referred by: Friend _____ Family _____ Internet _____ DriveBy _____ Other _____

- **Proof of registration required for any vehicle, boat, motorcycle, etc., that is stored at WRSS.**

2. Alternate Contact – required information

First Name _____ Initial _____ Last Name _____

Street Address _____

City _____ State _____ Zip _____

Home Phone _____ - _____ - _____ Cell _____ - _____ - _____ Work _____ - _____ - _____

E-Mail _____

3. Employer Information

Employer Name _____

Street Address _____

City _____ State _____ Zip _____

Work Phone _____ - _____ - _____ E-Mail _____