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No: Agreement No.

## **SELF STORAGE AGREEMENT**

ST	ORAGE TYPE	Personal		Business									
1	RECURRING P	PAYMENT (	Please compl	lete "Paym	ent Autl	hority" f	form A)						
	Card Type	M/Card	Vis	а	Amex			Other Me	thod				
2	STORER DETA	AILS (Your d	etails)										
	Company Name _			ABN									
	Surname _						irst Name (Miss / Mr / Mr)						
	Surname _					First N	ame				(Miss /	Ms / Mrs / Mr)	
	Address									Post C			
	Phone          Email           IF MOVING - New Address												
3	IDENTIFICATION ID Scanned										nned		
	Drivers Licence / P.P	P No Ex					piry Date DOB						
	Vehicle Make / Model	el					Colour Reg						
4	4 ALTERNATIVE CONTACT PERSON (In case of emergency)												
	Surname Fi						irst Name (Miss / Ms / Mrs / Mr)						
5	OTHER AUTHO	ORISED PE	RSONS (To	o enter you									
	2	<u> </u>											
6	<u> </u>				_	1 B)							
	INSURANCE (Please complete "Insurance Application" form B)							Policy No. <u>Insert Policy No.</u> @ \$1.50 per \$1,000 per Month = \$					
		proximate value of goods being stored?  ccept Insurance facilitated by the FO as detailed in the separate insurance						Decline Insurance facilitated by the FO and elect to self-insure and take the risk.					
agreement numbered: The insurance level I have chosen is adequate protection for the value of Goods stored.									·				
<b>P</b>	Accept Insurance	✓ Storers Sig	nature			Œ	Decline	nsurance	✓ Store	ers Signature			
7	SUMMARY OF												
	7 SUMMARY OF IMPORTANT POINTS (See Over) All payments are to be made in advance by you (the Storer).												
	Goods are stored at your own risk. We recommend that you take out insurance cover.     The Facility Owner (the "FO") is excluded from liability for the loss of any goods stored on its premises, except for laws which cannot be excluded, including rights under the Australian								e Australian				
<ul> <li>Consumer Law.</li> <li>You must not store hazards dangerous, illegal, stolen, perishable, environmentally harmful or explosive goods.</li> </ul>													
Unless specifically itemised and covered by insurance you must also not store goods that are irreplaceable such as currency, jewellery, furs, deeds, paintings, curios, works of a													
	and items of personal sentimental value or items worth more than \$2,000 AUD in total. While the FO takes reasonable care to provide a secure Space, we cannot guard against all risks and unforeseen circumstances beyond our control and therefore, we recommend that you take out insurance in relation to items you intend to store in the Space or									•			
store valuable goods in places specifically designed for this purpose (i.e. a safety deposit box).  The Space will only be accessible during set access hours as posted by the FO.  14 days' notice must be given for termination of this agreement.													
<ul> <li>The Storer must notify the FO of all changes to their or the ACP's address, e-mail, telephone numbers or other contact details.</li> <li>If you fail to comply with material terms in this agreement the FO will have certain rights which include forfeiture of your Deposit and the right to seize and sell / or dispose of your</li> </ul>										of your			
	goods (see clause 6).  The FO may have the righ	t to refuse access i	f all fees are not pa	aid promptly (se	e clause 1	1).							
• The FO has the right to enter the Space in certain circumstances (see clauses 6, 13, 14, 19, 20, 21 & 23).													
		y use a microprobe or CCTV to view inside the Space and rely on footage to enforce the contract, and/or may release footage to authorities (see clause 21A) in certain ces, including where the FO reasonably suspects breach of the law or damage to premises.											
8	The FO may discuss your		ılt and your details	with the ACP. U	Jpon termina	ation or de	fault, the Fo	D may elect to	release iten	ns to the ACP (see	clause 10(i))		
0	STORAGE DET	TAILS	→ Unit No	o(s)					[	Pin Code #:			
	Storage Period: From:						To:						
_	and automatically con		until	days	notice is					你的亓李,请提	<b>東前14</b> 天道	i知我们 谢谢!	
9	ACCEPTANCE	1	0 ST	ORAGE	COST	5							
	The Storer acknowledges that the details completed on this page are correct and agrees to be bound by the Conditions stated on this page and overleaf.							thly Stora	_				
							Monthly Insurance Premium (See 8) \$						
¥ 435-	Chame Oim 1							er Charges			\$		
	Storer Signature						Total Monthly Storage Charges \$						
	Date of Agreement						OTHER CHARGES  Late Payment Fee (Applied after 4 Days) \$ 15.00						
								Late Pavm	ent Fee (4	onlied after 4 D	avs)	\$ 15.00	