

10th District Agricultural Association/Siskiyou Golden Fairgrounds

2024/2025 STORAGE RENTAL AGREEMENT

EXHIBIT B

All of the following information must be completed before you are approved for storage rental. **By completing and returning this application for storage you acknowledge that you have received the Associations Storage Fees and Rules and understand that there is a six (6) month MINIMUM payment on all storage items.** Payment, driver's license, and insurance information covering the item to be stored MUST be completed on this form. **The length and height of items MUST be total of space that it will take up NOT manufacturers figures;** space is not guaranteed if measurements are incorrect. There is limited storage so this application should be returned with the deposit as soon as possible to reserve a space.

RENTER INFORMATION:

Name: _____
 Mailing Address, City State Zip: _____
 Contact Phone Numbers: _____
 Driver's License Number & Expiration Date: _____
 Insurance Carrier & Policy Number: _____

STORAGE ITEM INFORMATION:

Storage Location (circle preference): Inside Locked Building Outside Covered Barn Area

Type (circle item): Boat Trailer Motorhome 5th Wheel Camper Vehicle Other _____

****ALL 5th Wheel Storage Items must go in the Outside Covered Barn Area (they may not be stored Inside)**

Make/Model: _____

Length (total space needed): _____

****The Association cannot accommodate any storage item over 35' in total length.**

Height (highest point from the ground): _____

****The Association cannot accommodate any storage item over 12'6" in total height.**

Year & Color: _____

License Plate # & CF # (if applicable): _____

Visible Propane Tanks: _____ Visible Batteries: _____

Other Notes Regarding Storage Item: _____

FOR OFFICE USE ONLY:

Length	Height	Monthly Rate	Location Stored

Notes for Association (damage, etc.): _____

Paid from Date	Paid to Date	Receipt #	Amount Paid	Amount Due