

C H A P A R R A L
Self Storage

27380 NICOLAS RD, TEMECULA, CA 92591
(951) 699-4119

NAME TRANSFER FORM

Current Tenant:

Name: _____

Address: _____

City/State/Zip: _____

Home Phone: _____ Work Phone: _____

As the current tenant of Chaparral Self Storage unit # _____, I hereby release the contents & control of said unit to the Potential Tenant named below. By signing this Transfer Form, I understand that until a contract and/or other legal paperwork is completed by the Potential Tenant, and approved by Chaparral Management, I will be responsible for the unit.

Signature: _____ Date: _____

Potential Tenant:

Name: _____

Address: _____

City/State/Zip: _____

Home Phone: _____ Work Phone: _____

By signing below I understand that I am, as of the date signed, responsible for the contents and control of Chaparral Self Storage unit # _____,

Signature: _____ Date: _____

Chaparral Management Approval:

Signature: _____ Date: _____