



CONTRACT FORM

Customer Details

Full Name:
Forwarding Address:
Forwarding Postcode:
Contact Number:
Email:

Storage Fee Agreement
Cost Per Calendar Month: £
Commencement Date:

By signing this contract, I, The Customer confirm that I have read and agreed to be bound by the terms and conditions (On Website) and that the information provided is accurate and pertains to myself. I, The Customer, confirm that I can make the payments without financial hardship and that I will keep The Owner informed of any changes to my personal details, as provided, or of any issues which may impair my ability to pay the fees.
Customer Signature:
Print Name:
Date: