

AMERICAN MINI-STORAGE

10-DAY NOTICE TO VACATE

NAME: _____ UNIT# _____

ADDRESS: _____

Check if new address

CITY: _____ STATE: _____ ZIP: _____

I will be vacating the above unit by: _____

I will remove **all property** from the unit and leave it in a clean and sanitary condition.

My lease will terminate on the above date or prior. If the unit is found unlocked and empty, it will be considered abandon and that you have vacated and the property manager will prepare it for re-renting.

SIGN HERE ➔ Occupant Signature: _____ Date: _____

CUSTOMER EVALUATION INDICATE YOUR CHOICE

REASON FOR LEAVING

- Can't Afford
- Closing Business
- Consolidating Units
- Moving
- No Longer Need
- Renting Elsewhere _____
- Too Expensive
- Other _____

WOULD YOU RENT AGAIN? ____ yes ____ no

ARE YOU INTERESTED IN NEW SPECIALS?

Provide us an Email address: _____

WHEN DO YOU THINK YOU MAY NEED STORAGE AGAIN? _____

RATE US IN THE FOLLOWING AREAS: (1 as the lowest and 5 as the highest)

Cleanliness	1	2	3	4	5
Safety	1	2	3	4	5
Price	1	2	3	4	5
Staff	1	2	3	4	5
Service Provided	1	2	3	4	5

Thank you

We appreciate your business.

----- FOR OFFICE USE ONLY -----

Full Month's Pre-paid Rent From _____ To _____

Attach copy of tenant ledger and notes to request

REFUNDED TO TENANT \$ _____

Manager's Signature _____