



Fax: (403) 279-3851

RV STORAGE RENTAL AGREEMENT

LAST NAME: _____ FIRST NAME: _____

MAILING ADDRESS: _____

CITY/PROV: _____ POSTAL CODE: _____

EMAIL: _____

PHONE: (H) _____ (C) _____ (B) _____

EMERGENCY CONTACT: _____ PHONE: _____

RV DESCRIPTION MAKE: _____ MODEL: _____

LENGTH: _____ PLATE: _____

Renter is aware that ECCO RV storage DOES NOT INSURE and will accept NO LIABILITY for loss or damage to renter's Goods/Recreational Vehicle.

ECCO RV storage STRONGLY RECOMMENDS that the RENTER OBTAIN INSURANCE COVERAGE for Goods/Recreational Vehicle to be stored in the stall.

All RENTAL FEE'S MUST be prepaid, please be advised there will be NO REFUNDS if the contract is terminated early.

LATE FEE'S of 1.5% compounded monthly will be applied on ALL overdue FEE'S.

If any Goods/Recreational Vehicle is left in the stall PAST TERMINATION DATE there will be a fee of \$200 PER MONTH in which the SIGNEE is responsible to pay before the removal of the unit.

If a Goods/Recreational Vehicle is PARKED ANYWHERE other than the ASSIGNED STALL there will be a BOOT/PADLOCK placed on the unit and there will be a \$50 BOOT REMOVAL FEE.

There is only 1 unit per stall allowed unless prior arrangements were made with ECCO RV storage.

SPECIAL NOTES:

EFFECTIVE START: _____

RENEWAL DATE: _____

RENTAL AMOUNT: _____

STALL #: _____

GATE CARD #: _____

NEW CARD ISSUED: _____

I HAVE READ AND UNDERSTAND THE TERMS OF AGREEMENT ATTACHED TO THIS FORM. I AGREE TO ABIDE BY ALL TERMS AND CONDITIONS. I HAVE RECEIVED A COPY OF THIS AGREEMENT FOR MY RECORDS UPON SIGNING.

X _____

RENTER

X _____

ECCO WASTE SYSTEMS LP



10012 24th Street SE
Calgary Ab T2C 3X7
Ph: (403) 720-3851
Fax: (403) 279-3851

RV STORAGE UPDATE

LAST NAME: _____ FIRST NAME: _____

MAILING ADDRESS: _____

CITY/PROV: _____ POSTAL CODE: _____

EMAIL: _____

PHONE: (H) _____ (C) _____ (B) _____

EMERGENCY CONTACT: _____ PHONE: _____

RV DESCRIPTION MAKE: _____ MODEL: _____

LENGTH: _____ PLATE: _____

SPECIAL NOTES:

EFFECTIVE START: _____

RENEWAL DATE: _____

RENTAL AMOUNT: _____

STALL #: _____

GATE CARD #: _____

NEW CARD ISSUED: _____



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RV STORAGE CHANGE OF ADDRESS/INFO

LAST NAME: _____ **FIRST NAME:** _____

MAILING ADDRESS: _____

CITY/PROV: _____ **POSTAL CODE:** _____

EMAIL: _____

PHONE: (H) _____ **(C)** _____ **(B)** _____

EMERGENCY CONTACT: _____ **PHONE:** _____

RV DESCRIPTION MAKE: _____ **MODEL:** _____

LENGTH: _____ **PLATE:** _____