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RENTAL SCHEDULE

Please note that details below will be used for invoicing.

TENANT DETAILS

Name:			
ID No:			
Postal Address:			
		Code	
Physical Address:			
		Code	
Telephone:	(H)	(W)	
Cell Phone:			
e-mail:			
Relative Friend Name:			
Relative Friend:	(H)	(Cell)	

CONTAINER LEASE DETAIL

Storage Unit Number				Payment Reference :
Container Size	3m		6m	
Monthly Rental	R			Occupation Date :

Terms & Conditions :

1. I/We warrant that the information contained in this application form is true and correct.
2. I/We agree that this schedule constitutes a lawfully binding agreement.
3. I/We agree to sign and abide by the Terms and Conditions attached to this schedule.
4. I/We agree to pay a deposit as per the Terms and Conditions attached.
5. In the event of the party signing below in a representative capacity, he/she is duly authorised to act for and on behalf of NSS.

Tenant _____ Date _____

Lessor _____ Date _____