



Self Storage Quick Quote Indication

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Name of Corporation _____ Mailing Address _____ FEIN# _____

- 1) Name of Facility _____
- 2) **Name |Phone #| E-mail** _____ | _____ | _____
Location Address _____
- 3) # of Buildings on site: _____ Year converted _____ What was facility prior, if converted _____
- 4) Total Square Footage | Replacement Value _____
- 5) Year Built _____ Year Roof last replaced _____
- 6) Construction of Exterior Walls & Roof _____ | _____
- 7) # of rental units _____ open lot spaces _____ # employees _____ Annual Payroll \$ _____
- 8) Facility fully fenced/gated? _____
- 9) Monthly Rental Income \$ _____
- 10) Alarm System? Sprinkler System? _____ | _____
- 11) Current Occupancy _____%
- 12) Any tenants not for self storage? _____
- 13) State Association Memberships? _____
- 14) Any claims during prior 5 years, if any, please describe and amount paid _____ \$ _____
- 15) Current Insurance Carrier & Annual Premium | Effective Date _____ | _____

For a more accurate indication, please provide the following:

- 1) Site Diagram with Sq. Ft per building
- 2) Sample copy of lease/rental agreement

of rental trucks _____ Do you offer a tenant protection plan? _____

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