



132 Deer Park Road, Port Angeles, WA 98362 (360) 417-1199 Fax: (360) 417-1144  
www.DeerParkSelfStorage.com

# TRANSFER NAME OF TENANT

Please complete the section below to initiate your intent to transfer unit to another party.

I, \_\_\_\_\_, release my storage unit #, \_\_\_\_\_, located at Deer Park Self  
Storage, LLC to, \_\_\_\_\_, effective on \_\_\_\_\_. As of this  
date, any and all rent payment including late charges, if applicable, will be paid in full.

PRINT NAME

Bldg. & Unit

New Address of Responsible Party for the above referenced unit(s) as indicated above.

Street Address \_\_\_\_\_ Apt/Unit/Space \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**NOTE:**

1. This form must be signed in person at Deer Park Self Storage, LLC.
2. No discount/promotion will apply to this unit after this transfer.
3. A New Tenant Information Form must be completed and a New Contract must be done in the name of the responsible party herein noted. A photocopy of a driver's license is required from both parties.
4. **Joint Financial Liability – While this document is transferring a storage unit into another person's name, it does NOT remove the Financial Liability from the Original Tenant should the new responsible party (Tenant) fail to make any contractual required payments to our facility. We reserve the right to obtain any monies owed to our facility from either party noted on this document.**

\_\_\_\_\_  
Signature of Current Tenant on releasing \*unit/contract  
(\*NO RELEASE OF FINANCIAL LIABILITY)

\_\_\_\_\_  
Signature of New Tenant to be responsible unit/contract

**\*STAFF TO COMPLETE UPON RECEIPT\***

Date Received: \_\_\_\_\_ Received Via: \_\_\_\_\_ In-Person by Tenant  
\_\_\_\_\_ Invalid Delivery

Witnessed by: \_\_\_\_\_

Management Accepted By: \_\_\_\_\_ Date Accepted/Rejected: \_\_\_\_\_

Entered Into Computer By: \_\_\_\_\_ Date Entered: \_\_\_\_\_

\*This form is to be retained in the Tenant Storage Unit File.