

RENTAL AGREEMENT

Tel: 207-862-4094  
Fax: 207-862-4165

HERMON  
S&S SELF-STORAGE  
2014 Hammond St. Rte 2  
Hermon, Maine

Appointment Only  
Office Location:  
321A Papermill Rd.  
HAMPTON, ME 04444

DLRents.Com

Info@maineapartmentsandselfstorage.com

Monthly Rental \_\_\_\_\_ Date \_\_\_\_\_  
Security Deposit \_\_\_\_\_ Unit No \_\_\_\_\_  
Other Charges \_\_\_\_\_ Size \_\_\_\_\_  
Returned Check Charge is \$25.00

Name \_\_\_\_\_ Home Phone \_\_\_\_\_  
Address \_\_\_\_\_ Work Phone \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Social Security No \_\_\_\_\_ Spouse Name \_\_\_\_\_

**IT IS YOUR RESPONSIBILITY TO NOTIFY THE OFFICE OF A CHANGE OF ADDRESS OR PHONE NUMBER WITHIN 14 DAYS.**

Have you rented here before? \_\_\_\_\_ If so, when? \_\_\_\_\_

Employer Name \_\_\_\_\_  
Employers Address \_\_\_\_\_  
If in Military, please give following: Branch \_\_\_\_\_ Location \_\_\_\_\_  
Serial No \_\_\_\_\_ Tour Ends \_\_\_\_\_

Car Make \_\_\_\_\_ Type \_\_\_\_\_ Color \_\_\_\_\_  
Car License No \_\_\_\_\_ State \_\_\_\_\_  
Drivers License No \_\_\_\_\_ State \_\_\_\_\_

Description of Goods to be Stored: \_\_\_\_\_  
\_\_\_\_\_

Person Who Can be Contacted if occupant is unavailable:

Name \_\_\_\_\_ Relationship \_\_\_\_\_  
Address \_\_\_\_\_ Phone No \_\_\_\_\_

Print Names of Others Authorized Access:

\_\_\_\_\_  
\_\_\_\_\_

**1. PAYMENT OF RENT:** Occupant agrees to pay operator rent as shown above for unit(s) payable in advance upon execution of this agreement and on the **FIRST DAY OF EACH MONTH** thereafter. If rent is not paid by the Fifth (5th) day of each month for which it is due, the occupant agrees to pay a **LATE CHARGE** of \$5.00.

A. All rent periods begin on the first day of the month and end on the last day of the month.

B. Tenants who rent units starting on or after the first day of the month will have the first months rent pro-rated calculated on a 30-day month and rounded off to the nearest whole dollar.

C. All units are automatically rented for the next month if a notice to vacate has not been filed with the office at least ten (10) days prior to the end of the month. Should a tenant give his notice ten days prior to the end of his rental month, but wishes to occupy the unit for an additional few days, he may do so up to 5 days at double the daily rate for that unit. After 5 days he is obligated for another months rent. The payment must be received within 5 days to avoid a late charge.

D. Special rates apply **ONLY** to rents paid by the 5th of the month.

E. Miscellaneous charges not paid will be deducted from the security deposit.

**BE ADVISED THAT UNDER MAINE STATE STATUE, TITLE 10 SECTION 1374, THAT THE OPERATOR OF A SELF STORAGE FACILITY AUTOMATICALLY HAS A LEIN ON ALL PROPERTY STORED AT THIS FACILITY. AFTER 7 (SEVEN) DAYS OF NON-PAYMENT THE OPERATOR WILL OVERLOCK THE UNIT, A \$5.00 ADDITIONAL FEE WILL BE CHARGED FOR THIS. IF NON-PAYMENT CONTINUES, THE OPERATOR WILL EXECUTE HIS OPTION TO TAKE POSSESSION OF ALL ITEMS WITHIN THE UNIT AND ULTIMATELY SELL SAID ITEMS AT AUCTION.**

**2. STORAGE RESTRICTIONS:** Under **NO** Circumstances will the occupant use the unit(s) for residential purposes, storage of any living thing, food products, or any items which are dangerous, explosive, noxious, or deemed illegal. All spills will be immediately cleaned up by the occupant. All items will be stored inside the unit and nothing will be placed outside without the operators written approval. No repairs, maintenance, or manufacturing can be performed within the unit. All vehicles must be in operative condition.

**3. COLLECTION PROCEDURES & COSTS:** Occupant will be responsible for all costs entailed in collection of past due rent consisting of, but not limited to, legal fees, registered mailings, advertising, and ultimate disposal. Interest, after 30 days, will accrue on all unpaid balances at 11/2 % per month. **IF YOU WISH TO RECEIVE A MONTHLY INVOICE YOU MUST REQUEST THAT SERVICE WHEN YOU SIGN UP FOR YOUR STORAGE UNIT.** If payment is not received by the 8<sup>th</sup> of the month the unit will be **OVERLOCKED** and a \$5.00 late fee and \$10.00 Overlock fee assessed. All rents and fees must be paid in full before the unit is unlocked.

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**4. VACATING UNIT:** A ten-day written notice in advance of termination is required from the occupant. A Notice to Vacate form is attached to the end of this agreement for

your convenience. All items and trash in the unit(s) must be removed. If the unit is not completely swept clean, a \$10.00 cleaning fee will be deducted from your deposit.

Notice is deemed delivered, when operator has said notice in hand. The GATE KEY issued to you must be returned to the office before a deposit can be processed. Operator may terminate this agreement with a 15-day written notice to the occupant either in hand or by certified mail.

5. **INSURANCE:** The operator DOES NOT AND CANNOT assume any responsibility or liability for the occupants items stored in the unit. It is suggested that the occupant contact an insurance company and procure insurance on goods stored at this facility.

6. Occupant shall not block any common access areas. Vehicles blocking access areas will be towed at the owners expense.

7. **SUBLETTING:** Occupant may not sublet or assign the unit(s) covered by this agreement.

8. **INSPECTION:** Operator shall have the right to inspect the unit upon 24 hours notice (either written or verbal) However if any emergency is deemed to exist the operator or his agent may enter immediately. Additionally, the Occupant has inspected said unit(s) prior to the signing of this agreement and finds the unit(s) in good order and repair.

9. **SNOW REMOVAL:** The operator will keep access to units free of snow with the exception of snow and ice directly in front of doors which will be the occupants responsibility.

10. **SECURITY DEPOSIT:** The deposit is to insure condition of the unit or any monies owed under this agreement.. The occupant cannot use the deposit for payment of rent.

11. **PADLOCK:** The occupant will supply one padlock per door. The second padlock location is for use of the operator in case an overlock is necessary.

12. **CHANGE OF ADDRESS:** It is the occupants responsibility to inform the operator within 14 days of any change of address.

13. **RULES AND REGULATION:** Occupant agrees to abide by any rules and regulation adopted by operator. The Operator may modify same at any time by giving occupant 10-day notice either in hand or by mail.

14. Each tenant is issued a gate key allowing access to the storage area 24-hours a day for everyone's convenience. The gate is a vital part of the security for all tenants, please take time to re-lock the gate securely when you leave the storage area. Your cooperation is greatly appreciated by all.

15. All other agreements between the parties to this agreement will be in writing. All such agreements will be signed by both parties.

**I HAVE READ AND UNDERSTAND THIS RENTAL AGREEMENT AND HAVE A COPY FOR MY USE, RECORDS, AND PROTECTION.**

Acknowledged by the undersigned parties on this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

\_\_\_\_\_  
Operator

\_\_\_\_\_  
Occupant

EMAIL ADDRESS \_\_\_\_\_

**S & S SELF STORAGE and D & L APARTMENTS**  
321A Papermill Rd., Hampden, Me 04444  
Tel 207-862-4094 Fax 207-862-4165

**STORAGE OF PERSONAL INFORMATION AND/OR BUSINESS RECORDS**

**Be advised that we are not a Records Management Facility.**

**We do not allow nor do we accept the storage of business records, personal information, files or any paperwork that may contain any personal information.**

**Please contact a Records Management Facility for this purpose or rent a safe deposit box**

**By signing this addendum you are declaring that you are NOT storing ANY PERSONAL FILES FOR YOURSELF OR OTHERS IN YOUR UNIT.**

**Signature: \_\_\_\_\_**

**Date: \_\_\_\_\_**

**NOTICE OF TENANTS INTENTION TO TERMINATE TENANCY**

Mail To: S & S Self-Storage  
321A PAPERMILL RD.  
Hampden, Me 04444

FROM: Tenant's Name \_\_\_\_\_  
Current Address: \_\_\_\_\_  
Current Tel \_\_\_\_\_

Please take notice that the undersigned tenant intends to terminate his tenancy of rental  
Unit # \_\_\_\_\_ on \_\_\_\_\_  
(date)

Signature of Tenant \_\_\_\_\_  
Date Mailed \_\_\_\_\_

**Tenants notice of intent to vacate MUST reach the office 10 days prior to the end of the monthly rental period. Please refer to paragraphs 1 & 4 of your rental agreement.**

**Unit must be vacated of all stored items, trash, and pallets and free of damage.**

**Unit must be broom cleaned.**

**Gate Key must be returned to the office before deposits are processed.**

**(gate key can be mailed in a regular envelope with one stamp. Be sure to put your name and unit number with it.)**

**Fees: Un-swept, oil stains, etc. : \$10.00**

**Abandoned items: actual cost of disposal plus \$10.00 service fee**

**Damage: actual cost of repairs**

**Thank you for your patronage and cooperation.**