



FREEDOM HILL COOPERATIVE, INC
 11 Redwood Rd, Loudon NH 03307
 (603) 545-1239

COMMUNITY STORAGE AREA PERMIT APPLICATION

Name: _____ Address: _____
 Phone or Best Contact: _____ Date: _____

Description of item(s) to be stored. Please include registration numbers, serial numbers, and any other identifying information. Use the reverse side, if necessary, to list additional items or to include more descriptive information:

Drop this completed application in the FHC Office Box in the mailhouse or bring to a Board member

By signing the application below, you agree that you have read the Community Storage Area Policy, and agree to the rules listed therein. You further recognize and agree that Freedom Hill Cooperative, Inc and its Board of Directors is not responsible, in any way, for the items left in storage and that you understand both security and insurance is your own responsibility. All use of the storage area is at your own risk. You also understand that, upon relinquishing and or losing Membership in the Cooperative, due to moving or revocation, you will be required to remove any items from the storage area immediately, at most within 7 days, and that Freedom Hill Cooperative retains the right to have the items removed at your own expense and without regard to the final location of the items, should you fail to remove the items yourself after 7 days.

 Primary Applicant Signature

 Secondary Applicant Signature (if any)

COMMUNITY STORAGE AREA PERMIT

Permission has been granted for the above-listed items to be kept in the Community Storage Area, in accordance with the policies and rules in effect at this date.

DATES OF AUTHORIZED STORAGE: _____ TO _____

STIPULATING CONDITIONS (if any) : _____

APPROVED BY:

DATE:

 (Authorized Signature)
 PRINTED NAME: _____

COPY GIVEN TO:

Permit-holder

Secretary

FHC office files