



## ACCESS AUTHORITY

I \_\_\_\_\_

THE STORER OF UNIT No. \_\_\_\_\_

Hereby give the following persons who are listed below permission to access my storage space during office hours.

1. NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

DRIVERS LICENCE No \_\_\_\_\_

SIGNATURE \_\_\_\_\_

2. NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

DRIVERS LICENCE No \_\_\_\_\_

SIGNATURE \_\_\_\_\_

Signature of Storer \_\_\_\_\_

Storage King Bulimba  
ACN 12 065 343 777  
49 Taylor Street, Bulimba Qld 4171  
Tel:(07) 3899 1133 Fax:(07) 3899 0333

Email: [info@storagekingbulimba.com.au](mailto:info@storagekingbulimba.com.au) Web: [www.storagebulimba.com.au](http://www.storagebulimba.com.au)

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