



**NOTIFICATION OF CHANGE OF ADDRESS
OCCUPANT OF BARGOLD MANAGEMENT**

Storage Space #: _____

Occupant's Name: _____

Occupant's Email: _____

Building Address: _____

Old Address

Street Address: _____

City, State, & Zip: _____

New Address

Street Address: _____

City, State & Zip _____

New Phone: () _____

Emergency Phone: () _____

Emergency Contact

Name: _____

Street Address: _____

City, State & Zip: _____

Date

Occupant's Signature