

WORK MANAGEMENT CENTER

Facilities Services
University of Florida
PO Box 117700
Gainesville, FL 32611 352-392-1121

PO # _____

FS Customer ID # _____

FS MINI-STORAGE UNIT LEASE AGREEMENT

(Please complete all lines)

Unit _____ Size _____ AC _____ Yearly Lease Amount \$ _____

Dept _____ Dept ID _____

Contract Person Name _____ Phone _____

Address _____ Email _____

THE LEASING DEPARTMENT AGREES TO THE FOLLOWING:

- > The term of this lease is July 1 until June 30 unless otherwise stated;
- > The Storing Department will sign and return Lease Agreements along with PO# to FS no later than the first two weeks of the Fiscal Year;
- > Storage of University/Department property only;
- > No hazardous substances, materials, fluids, drugs, medicines, etc. or any type of illegal substances;
- > The Storing Department will not use the storage units in any unlawful or illegal activities;
- > The Storing Department is responsible for reporting decaled property to UF Property Accounting;
- > Only standard UF Locks and Keys will secure the units. Lost keys can be replaced 392-1121 for \$5.00 each;
- > The University of Florida, Facilities Services, and its agents have full access to all units at all times;
- > The Storing Department will leave the Storage Unit clean when they vacate the unit;
- > The Storing Department will not alter the physical structure of the building in any way;
- > The Storing Department will keep Air Conditioning unit controls on LOW with LOW FAN at all times;
- > FS provides Electricity for lighting and A/C usage on some units. Turn Lighting off before locking up a unit;
- > The Storing Department will store all property inside their unit(s) only (no outside storage);
- > Insurance for the unit(s) and its contents is self-insured by the leasing Department and/or the University of Florida;
- > Facilities Services assumes no responsibility for the contents or the units and their safety;
- > Report Maintenance concerns to the Work Management Center, 392-1121;
- > All units and their connecting roadways are in a No Smoking zone;
- > Notify the Work Management Center at least 30 days in advance if you are going to vacate a unit -- 392-1121;

Signed: _____ Date: _____

Print Name: _____

Witness: _____ Date: _____

Print Name: _____