P O BOX 39027

QUEENSBURGH

4071

TEL: 031 701 9493

FAX: 031 701 3521

CELL: 083 555 1115

**STORAGE ACCEPTANCE FORM**

FULL NAME & SURNAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ID NUMBER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

COLLECTION ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

COLLECTION DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CONTACT NUMBERS- TEL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CELL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 ALTERNATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ FAX: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TOTAL COST OF QUOTATION: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

STORAGE INSURANCE: YES / NO

VALUE: R\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ X 0.25 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ = RATE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

STORAGE PERIOD: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PACKING / WRAPPING SERVICES REQUIRED: YES / NO

(PLEASE SUBMIT PAGE 7 ALONG WITH THE ACCEPTANCE FORM)

**BANKING DETAILS: CLASSIC REMOVALS**

 STANDARD BANK

 PINETOWN: 045-626

 ACC.NO: 25 031 2115

 REF NAME AND SURNAME (STORAGE)

CANCELLATION OF YOUR REMOVAL HAS TO BE PUT INTO WRITING AND SENT VIA EMAIL OR FAX; NO

VERBAL CANCELLATION WILL BE ACCEPTED. A CANCELLATION FEE OF 50% OF QUOTED AMOUNT

WILL BE CHARGED IF REMOVAL IS NOT CANCELLED WITHIN 72 HOURS OF REMOVAL DATE.

PLEASE NOTE: NO BOOKINGS WILL BE MADE WITHOUT AN ACCEPTANCE FORM AND A 50% DEPOSIT

OF THE TOTAL REMOVAL COST.

I CONFIRM THAT CLASSIC REMOVALSWILL DO MY REMOVAL AS PER THE QUOTATION.

DATED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ AND AS PER TERMS AND CONDITIONS OF THE CONTRACT.

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**CUSTOMER SIGNATURE DATE**

Tracy Engelbrecht