



WATERGATE COMMUNITY ASSOCIATION

Storage Room Removal Request

Date: _____

Time: _____

To: Watergate Community Association

From (unit owner or tenant): Unit# _____

Resident Name: _____

I am the registered owner or tenant of unit _____ and have been assigned storage room _____, bin # _____ as our exclusive use common area storage.

I have found that items not belonging to me/us have been stored in my/our storage bin. I direct WCA Staff to attempt to locate the owner of the items placed in my storage bin. Should these items remain in my/our assigned storage bin after **five (5) business days**, I further direct the WCA Security to cut the lock and remove the items in question.

I agree to hold the WCA harmless for following the above-initiated instructions.

Sincerely,

(Signature of Owner or Tenant)

(Date)

OFFICE USE ONLY

STORAGE LOCKER _____ BIN # _____ IS ASSIGNED TO UNIT _____

VERIFIED BY _____

DATE _____

AT THE INSTRUCTION OF THE REGISTERED OWNER OR TENANT AS STATED ABOVE, WCA SECURITY IS HEREBY DIRECTED TO REMOVE THE ITEMS FROM THE ABOVE STORAGE BIN.

(AUTHORIZED WCA SIGNATURE)

(DATE)

REMOVED BY:

NAME: _____ DATE: _____ TIME: _____