

INNERSPACE STORAGE CORPORATION

1600 N. State Route 291, Suite 410 Independence, MO 64058 Telephone 816/257-5252 Fax 816/257-5444

RESERVATION REQUEST FORM

All requests are subject to availability!

Complete & return this form with one month of payment to receive your confirmation number which will guarantee your space for the Fall/Winter of 2025. Storage charges will start on November 1, 2025.

Units may be placed in storage before November 1st and will be prorated.

Name: Address: City:						Home
						Home
			itate:	Zip:		
E-mail address:						
TYPE OF UNIT: (Please Cho	eck)					
Boat Auto M	Motor Home	Travel Trailer	5 th Wheel	Other		
Brand Name:			Length:			
1 Month Minimur	n Required for	Reservation – Mo	onthly Rate \$			
			(Make	Check Payable to In	nerspace Sto	orage)
Owner's Signature:						
		(Office use onl				
INNERSPACE AUTHORIZATION:			CONFIRMATIC	N#		_
ANACHINIT DAID		CLIECK #	,			