



**CUT LOCK AUTHORIZATION FORM**

Date: \_\_\_\_\_ Time: \_\_\_\_\_ (AM/PM)

Unit Number: \_\_\_\_\_

Tenant Name: \_\_\_\_\_

Driver License Number: \_\_\_\_\_ State: \_\_\_\_\_

**(Be sure to make positive identification of requesting party)**

I, hereby request and authorize the owner/property manager of **MORGAN'S POINT STORAGE** to remove my lock by means of cutting or drilling from the above referenced storage space. I agree to hold harmless and defend owner/property manager from any/all liability that may arise as a result of my request to remove said lock from the latching device.

TENANT'S SIGNATURE: \_\_\_\_\_

LOCK CUT BY: \_\_\_\_\_

WITNESSED BY: \_\_\_\_\_

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