

New Hampshire Self Storage Association

We would like to tell you about ourselves by answering a few simple questions.

WHO: We are a group of New Hampshire Self Storage owners and operators just like yourself.

WHEN: In 1998, we realized that by organizing and uniting our efforts, we could make a difference in our future and impact most any issue.

WHAT: Our objectives are as follows:

- To provide leadership and open lines of communication on issues that affect the self storage industry in our state
- To define and assert standards of excellence in the self storage industry in the State of New Hampshire
- To provide opportunities for members to increase their knowledge of the industry through research, discussion and the exchange of information
- To do any and all things that are appropriate to further these purposes

WHY: Should you be a member? It is vital to your business to have an entity in place to represent your views and the views of the industry in the case of adverse legislative activity.

Also, membership provides you the opportunity to network with your peers and colleagues at informal grassroots meetings and periodic membership meetings.

HOW: Just complete the membership application on the second page and mail to:

**New Hampshire Self Storage Association
Administrative Offices
2200 Front St
Manchester, NH 03102**

Questions? Contact Joe Mendola at (603)668-7000 or James Breen at (603)225-5599

MEMBERSHIP APPLICATION

Company Name: _____

Contact Name: _____

Mailing Address: _____

Email: _____

Phone: () _____

Fax: () _____

DUES SCHEDULE:

Dues are payable on a fiscal year basis (April 1 – March 31)

Qy pgt IQr gt cvqt 'Total Dues \$'32202

Vendor Total Dues: \$200.00

As evidence of this business' desire to join the NHSSA and willingness to conform to the bylaws of the association, I have set my signature (below) on this date and enclose my/our check for our annual dues (total above).

Alternatively, I/we assert that I/we do not presently own or manage any self storage properties in the State of New Hampshire but do have an interest in belonging to the NHSSA, and therefore are willing to comply with the bylaws of the association and to pay annual dues (total above).

Please indicate which of the following best describes your interest in the NHSSA:

____ Prospective Purchaser ____ Owner
____ Vendor Industry Supplier ____ Manager ____ Other

Signed _____

LISTING OF SELF STORAGE FACILITIES IN NEW HAMPSHIRE

Name of Facility: _____

Street Address: _____

City, State, Zip: _____

Phone: () _____

Manager: _____

Number of Units: _____ Total s.f. _____

Name of Facility: _____

Street Address: _____

City, State, Zip: _____

Phone: () _____

Manager: _____

Number of Units: _____ Total s.f. _____

Name of Facility: _____

Street Address: _____

City, State, Zip: _____

Phone: () _____

Manager: _____

Number of Units: _____ Total s.f. _____

Name of Facility: _____

Street Address: _____

City, State, Zip: _____

Phone: () _____

Manager: _____

Number of Units: _____ Total s.f. _____