

Luggage Handler Ca

Short-term Luggage Storage Form

Date: _____ SI No. _____ Reg Record No. _____

Name: _____

Mobile: _____ E.Mail: _____

ID Type _____ ID No. _____

Storage Date _____ Pick Up Date: _____

Hereby request luggage storage The sole purpose of this is to enable the guest luggage(s) to be kept in storage.

Description	Qty	Storage Date	Staff	guest Signature	Pick up Date	Pick up by Signature	Staff

Guest understands the terms and conditions being:

1. Maximum duration of storage to be two months.
2. "Luggage Handler Ca" will not be held responsible for any missing or damage items inside the luggage

Signature: _____

Staff: _____

Date: _____