

**SELF-SERVICE STORAGE FACILITY
FILING OF BUSINESS INFORMATION**
H-123 Rev. 10-2011

STATE OF CONNECTICUT
DEPARTMENT OF MOTOR VEHICLES
60 STATE STREET, WETHERSFIELD, CT 06161
TITLE DIVISION
On The Web at ct.gov/dmv



INSTRUCTIONS

1. Self-Service Storage Facilities must submit a one time filing of business information with the DMV.
2. Complete all sections.
3. Attach sample rental agreement and mail original form to the address above.
4. Upon receipt DMV will notify you of approval or denial via regular mail or email.

BUSINESS INFORMATION	NAME OF BUSINESS		NAME(S) OF PERSON(S) AUTHORIZED TO SIGN ON BEHALF OF BUSINESS	
	<small>ADDRESS OF BUSINESS (No. and Street)</small>		<small>(City or Town) (State) (Zip Code)</small>	
	MAILING ADDRESS OF BUSINESS (IF DIFFERENT FROM ABOVE)			
	<small>EMAIL ADDRESS</small>		<small>BUSINESS TELEPHONE NUMBER</small>	<small>SALES AND USE TAX PERMIT NUMBER</small>
	CHECK HERE <input type="checkbox"/> TO INDICATE YOU HAVE ATTACHED A SAMPLE RENTAL AGREEMENT			
	ANY CHANGES IN THE INFORMATION REQUIRED BY THIS FORM SHALL BE MADE IN WRITING AND SUBMITTED TO THE DEPARTMENT OF MOTOR VEHICLES WITHIN TEN DAYS.			
	CERTIFICATION	The information provided to the Commissioner of Motor Vehicles herein is subscribed by me, under penalty of false statement, in accordance with the provisions of Section 14-110 and 53a-157b of the Connecticut General Statutes. I understand that if I make a statement which I do not believe to be true, with the intent to mislead the Commissioner, I will be subject to prosecution under the above-cited laws.		
<small>AUTHORIZED SIGNATURE OF BUSINESS OWNER/PRINCIPAL</small>		<small>DATE SIGNED</small>		
	X			