



# FREEDOMVAULT

Your Private Storage Solution.

## Emergency Contact Card

**Name:**

**Secure Box#:**

**Anonymous Customer:** Please complete the following Emergency Contact form and place inside your storage box. In the event of an emergency, foreclosure or abandonment, your designated Emergency Contact will be notified. You will be the only one that knows who you designated as your Emergency Contact.

### Emergency Contact

**Full Name:**

**Address:**

**City:**

**State:**

**Zip:**

**Phone:**

**Instructions:** I hereby designate as my agent to have access to and to control of the contents of my Private Secure Storage Box. Other instructions may be written on back of card.

For Instructions please include the date and your signature.

**Signature:**

**Date:**

