

**Automatic Credit card Payment Authorization Form***(PRINT INFO)*

This form gives Access Mini Storage authorization to automatically process monthly rental payments from the following customer with the credit card information provided below.

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

Name of Cardholder: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

**Type of Credit Card (circle one)**

VISA

MASTERCARD

I authorize ACCESS MINI STORAGE to charge the above credit card account automatically every month and to apply this charge toward the monthly charges agreed upon in my Lease Agreement with ACCESS MINI STORAGE for the unit number(s) listed above. I agree and understand that I will be responsible for all the monthly charges including any additional fees that may be associated with my credit card being cancelled, declined or unable to process a payment.

I agree and understand that it will be my responsibility to notify ACCESS MINI STORAGE in writing of any changes to my credit card information and that I will provide to them 2 days oral notice of my plans to vacate the above rented space. I also agree that if I vacate my space without giving notice that ACCESS MINI STORAGE can charge my credit card for any additional rental or fee charges,  **(initial here)**

Name: (Print) \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**ACCESS MINI STORAGE USE ONLY:**

NAME OF Manager Receiving Authorization Form: (print) \_\_\_\_\_

Date: \_\_\_\_\_

Sign: \_\_\_\_\_