



UNIT # _____

AUTO PAY

HOLD ON FILE

ONE TIME USE

CREDIT/DEBIT CARD AUTHORIZATION FORM

OCCUPANT'S NAME: _____ STATE: _____ ZIP: _____

MAILING ADDRESS: _____ HOME PHONE: (____) _____ - _____

APARTMENT/SUITE: _____ MOBILE PHONE: (____) _____ - _____

CITY: _____

By selecting the Auto Pay option, you, the OCCUPANT are stating that you have agreed to the following terms:

- 1) Rent Payments will automatically be paid from the account indicated below on the **(1st) first business day of the month**. The first monthly automatic rent payment will begin **the first business day of the following month:** _____ and will continue until OWNER, OCCUPANT or FINANCIALLY RESPONSIBLE PARTY properly terminates the automatic rent payment authorization form or the rental agreement.
- 2) The OCCUPANT or FINANCIALLY RESPONSIBLE PARTY **must** notify the OWNER, in writing, if the Credit/Debit Card used for monthly automatic payments has been changed for any reason (Example: Change in expiration date, Card has been compromised, Lost, or Account is Closed).
- 3) The OCCUPANT is the primary party responsible for the payment of balance due to the OWNER if the automatic payment cannot be processed for any reason. The OCCUPANT is solely responsible. The OCCUPANT may also be in default in the event that any rental payment and/or service charge due is unpaid. OWNER may terminate the rental agreement and/or begin endorsement of the OWNER'S Lien in accordance to Colorado State Storage Lien Laws.

CARD HOLDER INFORMATION:

TYPE OF CREDIT/DEBIT CARD (CHECK ONE): VISA MASTER CARD AMEX DISCOVER

Credit/Debit Card Number: _____ - _____ - _____ - _____ CVW (3 digit code): _____ Exp: ____/____

PRINT NAME: (AS IT APPEARS ON CREDIT /DEBIT CARD): _____

ADDRESS ASSOCIATED WITH CARD: _____ APT/SUITE: _____

CITY: _____ STATE: _____ ZIP: _____

I, _____ (print name), the undersigned, authorize Mountain Mini Storage to use my credit/debit card for the purpose selected above. I understand that I may terminate the agreement at any time and that I am responsible for keeping my card information up to date and accurate and that failure to do so may result in late fees, lien charges and the sale of the contents of all of the storage unit(s) rented on my account.

CARDHOLDER SIGNATURE: _____ DATE: ____/____/____