



### ***Authorization to Charge***

Unit(s) #: \_\_\_\_\_ Contract #: \_\_\_\_\_

Cardholder name: \_\_\_\_\_

Card type:    Visa \_\_\_\_    MasterCard \_\_\_\_

Account #: \_\_\_\_\_ Expiration date: \_\_\_\_\_

Last three numbers on back of card (located in signature area): \_\_\_\_ \_\_\_\_ \_\_\_\_

Billing address of credit card, including zip code:

\_\_\_\_\_

Monthly rent:                      \$ \_\_\_\_\_

Other recurring charges:        \$ \_\_\_\_\_

TOTAL to charge:                 \$ \_\_\_\_\_

By signing below, the cardholder authorizes ***Easy Self Storage LLC*** to charge the periodic rent amount and any applicable charges per the terms of the contract, each month for the term of occupancy or until the cardholder cancels authorization.

Cardholder signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print name: \_\_\_\_\_

**Please fax form to Easy Self Storage at 802-863-8311.**