



20 Design Avenue
Fletcher, NC 287
828-654-94

Auto-Pay Authorization

Airport Self Storage, henceforth known as the Company, is now offering a Monthly Autopay Program option. With this recurring payment option, you monthly payment will automatically be withdrawn from your debt card or your credit card account.

Personal Information

Name (as it appears on your account or credit card) _____

Address _____

City, State Zip _____

Home phone _____

Unit number(s) to be automatically paid _____

Monthly rental amount of \$ _____ will be charged.

Billing option

Charge my credit card

Required Information to Charge my credit card

VISA Mastercard Discover American Express

Credit Card Number _____

Expiration Date (mm/yy) _____ CWV# _____

Cardholder name as it appears on the card _____

I _____ the undersigned, authorize the management of Company to charge my checking account or credit card specific above for charges incurred on the unit numbers listed above on the __ day of each month. I understand that the amount of the payments may vary each month per the terms of the lease including rate increases or other fees. Should the monthly charge increase, Company is authorized to charge the new monthly rate. I understand that additional service charges may apply if payment is returned due to insufficient funds. I understand that this payment authorization will continue until written notice is given to Company.

I agree to notify Company of any change to the selected billing option to continue this service: 1) Credit Card Number change 2) Expiry Date 3) Billing Address 4) Card holder change 5) Routing and account number change for bank account.

I may terminate this agreement by giving written notice to the Company at any time, but must allow a reasonable amount of time after receipt for the Company to act upon it.

Please enroll my account(s) in the recurring **Monthly AutoPay Program** I selected above.

Card Holder Name Date

Card Holder Signature Date