



**Automatic Payment Authorization Form**

There are several options in which your monthly occupancy charge may be paid automatically on the \_\_\_\_\_ of every month.

After filling out your personal information, please choose one billing option:

- Option 1) Have your payment automatically withdrawn from your bank account
- Option 2) Have your payment automatically charged to your credit card.

**Personal Information**

Name \_\_\_\_\_ Unit# \_\_\_\_\_ Property: \_\_\_\_\_

**Option 1: Auto Debit**

Financial Institution Name: \_\_\_\_\_

Routing and transit number : \_\_\_\_\_

Account number : \_\_\_\_\_ \* will be obliterated after data entry

Checking account \_\_\_\_\_ or Savings account \_\_\_\_\_ (choose one)

**Option 2: Auto Charge**

Card Number\* \_\_\_\_\_ Exp. Date (mm/yy) \_\_\_\_\_  
\*all but the last 4 digits will be obliterated after data entry

CVV # \_\_\_\_\_ Name on Card \_\_\_\_\_

Billing Address: \_\_\_\_\_

Cardmember Acknowledges Receipt Of Goods and/or Services In The Amount of \$\_\_\_\_\_ The Total Shown Hereon And Agrees To Perform The Obligations Set Forth By The Cardmember's Agreement With The Issuer.

I also understand that I may terminate this agreement by giving notice to Guardian Self Storage. I may do this at any time in writing, but must allow a reasonable amount of time after receipt for management to act upon it. **I also understand that an additional service charge of \$25.00 per transaction will apply if payment is returned, declined or rejected.** \_\_\_\_\_ (initials)

Please enroll my account(s) in the AutoPay Program selected by me.

\_\_\_\_\_  
**Occupant Signature** **Date**