



Facility _____

CREDIT CARD AUTHORIZATION FORM

Unit # _____

Tenant Name _____

Name on Credit Card _____

CC Billing Address _____

City _____ State _____ Zip _____

Last Four #s on the Credit Card _____ Exp Date _____

Visa _____ MasterCard _____ Discover _____ Phone # _____

I hereby authorize U-Store Self Storage to charge my account through an automatic deduction on the 5th of each month. Applicable charges may include, but are not limited to, the current monthly rental rate, late fees, locks, lock cuts and any additional fees incurred as a result of the unit not being secure or becoming delinquent.

This authorization will remain in effect until notified in writing. **Written** notification to terminate this agreement **MUST** be received by the 1st of the month to avoid automatic withdrawal. **No refunds will be made.** This form also authorizes any verbal changes from the cardholder with no new form required.

TENANT'S FAILURE TO GIVE NOTICE IN WRITING BEFORE VACATING WILL RESULT IN THE TENANT REMAINING LIABLE FOR THE CURRENT MONTHLY RENTAL RATE ON THEIR UNIT FOR THE ENTIRE MONTH. I further understand that it will be my sole responsibility to notify U-Store Self Storage of any changes to my credit card information that was provided above. If changes are not made prior to the automatic monthly rental deduction, fees will apply.

Print Name

Date

Signature

U-Store Representative

OFFICE USE ONLY

Effective Date: ____/____/____

Monthly Rent: \$_____

Storage Rep Initials: ____