AUTHORIZATION FOR AUTOMATIC CREDIT/DEBIT CARD AUTOMATED CLEARING HOUSE (ACH)

To take advantage of the convenience of automated payment, please complete the following information and sign as indicated.

This authorization form is for the following unit(s)):
I authorize (facility name) to automatically debit the monthly rent for the unit(s) shown above from my credit or debit card or bank account as detailed below. As of this date, the total amount to be charged monthly is \$ I understand that I will be notified in writing, as set forth in the Rental Agreement, if the rental amount due for my unit(s) changes, and that the amount debited monthly will reflect the effective rate. This authorization will remain in effect until terminated in writing.	
option. If an automatic debit is refused for any unauthorized account, insufficient funds, or inco	fication, to terminate your participation in this payment y reason, including over-credit-limit charges, closed or orrect expiration dates, we will not be able to process in the Rental Agreement will be charged, and you will be not.
Tenant's signature	Date
Printed name	_
	rCard □ VISA □ American Express □ Discover
Card number	Expiration (MM/YY)
Automated Clearing House (ACH)/Bank Draft	
Financial institution name	Branch/address
Name(s) on account	
Bank routing number	Checking/savings account number
Please include a voided check with this form.	
	my automated debit for rent. I understand that I am still, and am subject to the terms set forth in the Rental
Tenant's signature	Date