

# AUTOMATIC PAYMENT AUTHORIZATION FORM

Appleton Self Storage henceforth known as the Company, offers an automatic payment option. With this option, your monthly payment will automatically be withdrawn from your checking account or your credit card account.

After filling out your personal information, please choose one billing option: Option 1) Have your payment automatically withdrawn from your Bank Account (ACH) Option 2) Have your payment automatically charged to your Credit Card (CC)

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

\_\_\_\_\_ other names on your account or credit card  
card \_\_\_\_\_

Current Street Address: \_\_\_\_\_

City, State Zip: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Unit number(s) to be automatically paid: \_\_\_\_\_

Billing options (select one) |\_\_| Option #1 - Charge my Bank Account (a voided check must be attached to initiate this option)|\_\_| Option # 2 - Charge my Credit Card

Option # 1 - Required Information: Charge my bank account A voided check must be attached to initiate this option.

Routing and Transit number: \_\_\_\_\_

Checking/Savings account number: \_\_\_\_\_

Option # 2 - Required Information: Charge my Credit Card: Credit Card type (Visa, MC, AMX, Discover, etc): \_\_\_\_\_ Card Number \_\_\_\_\_

Expiration Date (mm/yy): \_\_\_\_\_/\_\_\_\_\_ CCV: \_\_\_\_\_

Credit Card Billing Address (where you receive your credit card statements) Street or P.O. Box: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

I, \_\_\_\_\_ the undersigned, I am authorizing the management of Appleton Self Storage to charge my Checking Account or Credit Card specified above for charges incurred on the unit numbers listed above on the \_\_\_\_\_ of each month.

I also understand that I may terminate this agreement by giving notice to the Company. I may do this at any time in writing but must allow a reasonable amount of time after receipt for the Company to act upon it. We need 14 days to make sure we have the time to process.

I also understand that additional service charges may apply if payment is returned due to insufficient funds.

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

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Tenant Signature

Date