



Monthly Credit Card Deduction Authorization Form

3050 Orange Ave. * Long Beach, CA * 90807

(562) 595-6358 Phone * (562) 595-5541 Fax

info@storcoselfstorage.com * Email

Tenant Name: _____

Unit #: _____ Anniversary Due Date: _____

I authorize **Storco Self Storage** to automatically deduct my monthly-accrued space rent and any fees that may be due from the credit card listed below. By signing this form, I agree to the following terms:

- * Rent and any applicable fees will be deducted on tenant's rental anniversary due date on a monthly recurring basis.
- * A 10-day written notice must be provided to the office of Storco Self Storage to cancel automatic deduction plan.
- * All rental payments and/or any other fees paid are non-refundable (this is in accordance with my lease agreement).
- * It is the tenant's responsibility to update any changes to the credit card that is listed below and a new authorization form will need to be filled out and submitted to the office of Storco Self Storage.
- * Storco Self Storage will attempt to charge your credit card on the anniversary due date and everyday thereafter until funds are available. If the funds are not available after your grace period ends, any and all fees will be added to the account.
- * Delinquent accounts are processed as set forth in your rental lease agreement. Refer to your contract for details.

(Circle One) Visa • MasterCard • Discover • American Express

Card #: _____ Exp. Date: _____

Security Code #: _____

Card Holder's Name: _____

Billing Address: _____ Apt. #: _____

City: _____ State: _____ ZIP: _____

Card Holder Signature: _____ Date: _____

(Must be listed on unit contract as authorized alternate)

Mail Receipt Back (\$1.00 extra charge monthly) Yes

Tenant Signature: _____ Dated: _____

Employee Signature: _____ Dated: _____