



# COLLEGE PARK STORAGE CENTER

1420 N. Orange Blossom Trail  
Orlando, Fl 32801  
Phone: 407-650-9033  
Fax: 407-650-3739

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

## Authorization for Automatic Credit Card Payment

By signing below, the cardholder authorizes the company described above to charge the periodic rent amount and any applicable tax per the terms of the agreement, each month for the term of occupancy or until the cardholder cancels this authorization.

Rent: \_\_\_\_\_  
Insurance: \_\_\_\_\_  
Other Recurring Charges: \_\_\_\_\_  
Total to Charge: \_\_\_\_\_  
Unit(s): \_\_\_\_\_

Note: All charges includes tax, if applicable.

Cardholder name: \_\_\_\_\_  
Card number: \_\_\_\_\_  
Expiration Date: \_\_\_\_\_

Cardholder Signature: \_\_\_\_\_ Date: \_\_\_\_\_

