

Credit Card Authorization Form



By signing below, the cardholder authorizes **Central IL Storage** to charge the monthly rent amount, along with any applicable taxes, as per the terms of the rental agreement, for all open charges due on rent and other fees. This charge will occur each month for the duration of the occupancy or until the cardholder cancels this authorization.

Card Information

TYPE OF CREDIT CARD

Visa Mastercard American Express

LAST FOUR DIGITS OF CREDIT CARD NUMBER

EXPIRATION DATE

CARDHOLDER'S NAME

CARDHOLDER'S ADDRESS

CARDHOLDER'S POSTAL CODE

AUTHORIZED SIGNATURE

DATE