

Broadmoor Storage Solutions  
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Pasco, WA 99301  
509-547-3777

AutoPay Credit Card Authorization Form

Broadmoor Storage Solutions is now offering an automatic payment option. With this option, your monthly payment will automatically be withdrawn from your credit card account.

Personal Information

Name (as it appears on your account or credit card) \_\_\_\_\_

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

Current street address \_\_\_\_\_

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

Home phone \_\_\_\_\_

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

Required Information for Option: Charge my credit card

Credit card type (Visa, MasterCard, Discover) \_\_\_\_\_

Card Number \_\_\_\_\_

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

CVV2 (3 digit number on back of card) \_\_\_\_\_

Name on Card \_\_\_\_\_

Credit Card Billing Address (where you receive your credit card statements)

Street or P.O. Box \_\_\_\_\_

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

I, \_\_\_\_\_, authorize the management of Broadmoor Storage Solutions, to charge my credit card specified above for charges incurred on the unit numbers listed above on the first day of each month. I also understand that the amount of the payments may vary each month.

I also understand that I may terminate this agreement by giving notice to Broadmoor Storage Solutions. I may do this at any time in writing, but must allow a reasonable amount of time after receipt for Broadmoor Storage Solutions to act upon it.

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

\_\_\_\_\_  
Tenant Signature

\_\_\_\_\_  
Date