

Credit / Debit Card Authorization Form

DATE: _____

I hereby authorize _____, hereinafter called COMPANY,
Property Name

To initiate credit / debit card transactions and to initiate, if necessary any adjustments for any transaction in error to account indicated below and the credit card type named below, to credit and/or debit the same to such amount. This authority is to remain in effect until COMPANY has received written notification of its termination in such time and in such a manner as to afford COMPANY a reasonable opportunity to act on it.

CHECK ONE:

ONE TIME CHARGE -

I would like my credit / debit card charged one time for the amount due specified by the Company**

APPLICATION FEE \$65.00 + HOLD DEPOSIT \$150.00 = \$215.00

RESIDENT PAYOR INFORMATION

Resident Name:	Unit #	Phone Number:	
		City / State NOVI	Zip: 48375
Payor Name (if different than resident name):	Unit #	Phone Number:	
Credit/Debit Card Billing Address:		City / State	Zip:

CREDIT / DEBIT CARD INFORMATION



Credit Card Type: () VISA () MC () DISCOVER	Credit card Number:	Exp. Date:	Security Code:
Amount or Billed Amount: \$215.00	Transaction Fee: \$6.95	Total Amount Charged: \$221.95	
Card Holder's Name:	Cardholder's Signature:	E-Mail Address:	

*** You will be charged a Flat Fee for use of this service. (See fee schedule below)

TRANSACTION FEE SCHEDULE	
	\$6.95

 Please Initial to acknowledge the above changes

* This payment will be registered as "Property Management" or "Rally Property Management" on your credit card statement.