



CREDIT CARD AUTHORIZATION FORM

Please complete and sign this form to authorize Roby Brothers Property Management Inc (RBPM Inc) to apply charges to your credit card listed below. All information provided will be confidential, securely stored, and only viewed by RBPM Inc officers.

Please choose Option 1 or 2. Check the box and initial.

- 1. I authorize RBPM Inc to automatically charge my credit card at the beginning of each month for services provided the previous month.
- 2. I authorize RBPM Inc to charge my credit card for the full amount due if my account is 30 days past due.

Please complete the information below:

I _____ authorize RBPM Inc to charge my credit card indicated below for the Option chosen above.

Billing address _____
City, State, Zip _____
Phone # _____ Email address _____

Circle Card Type: Visa Mastercard Discover American Express

Card Holder Name: _____

Account Number: _____

Expiration Date: _____ **CVV2** (3 digit # on back of card:) _____

I authorize RBPM Inc to charge the credit card indicated on this authorization form according to the terms outlined above. I certify that I am an authorized user of this credit card and that I will not dispute the payments with my credit card company; so long as the transaction corresponds to the terms indicated on this form.

Signature: _____ **Date:** _____