

E-Z Pay No Late Fee Guarantee

STORE	DATE (MM - DD - YY)	STORE #
EMPLOYEE	-	
NAME:		
	<u> </u>	
CUSTOMER NAME		SPACE #
Name on credit card	CREDIT CARD #	<u>.</u>
	LIST LAST 4 DIGITS ONLY	
Mailing address for credit card	CREDIT CARD EXPIRATION DATE	
CITY, STATE, ZIP CODE	CREDIT CARD TYPE:	
	VISA - MC - AMEX	C - DISCOVER
With E-Z Pay there are no fee	es, Guaranteed!	
I hereby authorize StoragePRO or it's affiliate to automatically charge the payment toward any outstanding rent, fees or merchandise I have incurred is to be in an amount equal to my monthly rent in effect at the time.		
The monthly rent is charged on the Due Date (1st day of every month). I use I notify the self-storage (in writing or via my account @ www.storagepro.co to the first of the month I intend to vacate the premises. Otherwise I will be	om) of my intended vacate date no	
In the event the aforesaid credit-card is declined for any reason, I will be repursuant to the Rental Agreement.	esponsible for all rents, late fees a	and other charges
CARDHOLDER SIGNATURE:	DATE:	
CARRIOI DER NAME.		