



Credit Card Authorization Form

Name on the Card: _____

Type of Card: Visa MC AmEx Discover

Other _____

Account Number _____

Expiration Date _____

Security Code _____

Billing Address _____

City, State, Zip _____

Phone Number _____

Monthly Rent _____

Unit # _____

Amount to be Charged _____

**By signing this form, you authorize Beyondoffice Holdings LLC
to charge your card for the amount listed above.**

Signed: _____

Date: _____

I certify that all information is complete and accurate. I hereby authorize Beyondoffice Holding LLC to collect payment for Monthly Rent per the term of the lease. Charges as indicated will be Approved Charges of this form by processing monthly Rent payment to be charge to the credit/debit card listed above. Charges must not exceed the Monthly Rent indicated on the form. I understand that a new form will have to be completed if tenants wishes to change or modify the total. I certify that I am the authorized signer of the credit/debit card listed above.