

CREDIT CARD AUTHORIZATION FORM

Sign and complete this form to authorize Mayton Transfer Lofts a Plum Street Partners Community to charge my credit card for the items listed below.

By signing this form you give us permission to debit your account for the account indicated on or after the indicated date. This is permission for a single transaction only, and does not provide authorization for any additional unrelated debits or credits to your account

Cardholder Name: _____

Billing Address: _____

- Reservation Fee/Security Deposit: _____
- Application Fee: _____

Account Type: <input type="radio"/> Visa <input type="radio"/> MasterCard <input type="radio"/> Discover	Expiration Date:
Card Number:	CVV2 Number:

SIGNATURE _____ DATE _____

I authorize the above named business to charge the credit card indicated in this authorization form according to the terms outlined above. This payment authorization is for the goods/services described above, for the amount indicated above only, and is valid for one time use only. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company; so long as the transaction corresponds to the terms indicated in this form.

Office Use Only

Transaction #:	Blacked out Acct #	Agent Initials